



Summer Adventure Camp VWR Scholarship

Dear Applicant,

SciTech Hands On Museum is proud to offer a camp scholarship program for students in the community of Aurora, IL, to attend SciTech Summer Adventure Camps!

With funding from the VWR Charitable Foundation, SciTech will be providing 25 students a full scholarship for one week of camp for the summer of 2017. This scholarship is currently being offered to any qualifying family whose child is entering 1st through 8th grade for the fall of 2017, and whose parent/guardian is a resident of Aurora, IL.

One scholarship is for 2 camp sessions, equalling one full week of camp. Scholarships will be awarded based on first come, first serve basis, and to families who qualify based on the listed requirements.

To Apply:

Students who wish to be considered for a SciTech Summer Adventure Camp VWR Scholarship must complete the attached scholarship application and submit the following:

- Applicant's parent/guardian must provide proof of residency in Aurora, IL (such as driver's license, state ID, utility bill, lease contract, or bank statement).

AND

- Applicants must provide proof of current status or enrollment in any of the following programs: TANF, SNAP, WIC, Food Stamps, Medicaid or medical assistance, general assistance, SSI, section 8 housing, foster care status, or other documents listed on the application. Other programs and/or documents can be reviewed and accepted on a case-by-case basis. Contact SciTech at (630) 859-3434 ext 236 or camps@scitechmuseum.org for questions or details.

Please submit by Wednesday, May 31st.



Summer Adventure Camp VWR Scholarship Application

Applicant's Information:

**required field*

*Child's First Name	*Child's Last Name/Surname	*Birth Date
*Grade Entering in Fall	*Name of School Attending in Fall	
Ethnicity: (optional)		
<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> White or Caucasian	<input type="checkbox"/> Black or African American
<input type="checkbox"/> Not Hispanic/Latino	<input type="checkbox"/> Native American	<input type="checkbox"/> Other _____
<input type="checkbox"/> Asian / Pacific Islander <input type="checkbox"/> Prefer Not to Answer		

Parent/Guardian and Contact Information:

**required field*

*Parent/Guardian (First and Last name):		*Relationship to Child:	
*Street Address:			*City:
*State:	*Zip Code:	*Primary Phone: ()	Secondary Phone: ()
Valid Email Address:			

Session Preference:

Note: Scholarships are provided for one full week of camp. Please circle the two camps which would work best for you.

- | | |
|-------------------|-------------------|
| 1. June 19th-23rd | 3. July 10th-14th |
| 2. June 26th-30th | 4. July 17th-21st |

Do you currently receive any of the following:

Please check all that will be submitted

<p>Proof of Status or Enrollment in: <i>One of the following</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> TANF <input type="checkbox"/> SNAP <input type="checkbox"/> WIC <input type="checkbox"/> Food Stamps <input type="checkbox"/> Medicaid <input type="checkbox"/> Medical Assistance <input type="checkbox"/> General Assistance <input type="checkbox"/> SSI <input type="checkbox"/> Section 8 housing <input type="checkbox"/> School fee waiver <input type="checkbox"/> Proof of income (i.e. pay stub with gross income) <input type="checkbox"/> Foster Child Status <input type="checkbox"/> Other: _____ 	AND	<p>Proof of Residency: <i>Choose one</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> State issued ID <input type="checkbox"/> Utility bill or bank statement <input type="checkbox"/> Lease contract <input type="checkbox"/> Foster Child Status <input type="checkbox"/> Other: _____
<p><i>Other documents can be reviewed and accepted. Call (630) 859-3434 Ext. 236 for details.</i></p>		