

## **HENRY COUNTY 4-H CAMP**



**University of Kentucky**  
College of Agriculture,  
Food and Environment  
Cooperative Extension Service

## SCHOLARSHIP APPLICATION

## **Lake Cumberland 4-H Camp**

***Please Print -All Information Must be Completed (BOTH Sides of Form)***

## GENERAL:

Child's Name \_\_\_\_\_

Parent's Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Gender (Circle One)      Male / Female      Age \_\_\_\_\_

Grade in School \_\_\_\_\_ School Attended \_\_\_\_\_

Have you attended 4-H Camp before? \_\_\_\_\_ If so, how many years? \_\_\_\_\_

Have you received a camp scholarship in the past (Circle One) Yes / No

If yes, was the scholarship a partial or full amount? \_\_\_\_\_

How many individuals live in your household? \_\_\_\_\_ How many under 18? \_\_\_\_\_

## REFERENCES:

**Each applicant must submit a letter of reference to be considered for a scholarship.** This may come from a teacher, Family Resource Center Coordinator (FYSRC), coach, 4-H Leader, pastor, youth minister, etc. (cannot be a family member).

## ESSAY:

Parent/Guardian: What reasons increase your family's need for a camp scholarship?

*Camper:* Why do you want to attend 4-H Camp?

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### **AMOUNT REQUESTED:**

The cost for camp for 2024 will be \$250. Please indicate the amount you are requesting.

**Please note:** A \$25 non-refundable deposit is required upon receipt of the registration. All efforts will be made to fill the requested amount but it is not guaranteed. All camper families

are asked to contribute *something* to their camp fee.

Scholarship Amount Requesting \$\_\_\_\_\_

### **SIGNATURES:**

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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### **OFFICE USE ONLY**

Date Received: \_\_\_\_\_

Reference Letter included: YES / NO

Amount Awarded: \_\_\_\_\_

