

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?

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: _____

OFFICE USE ONLY

Date Received: _____

Reference Letter included: YES / NO

Amount Awarded: _____

