

The Camp Spirit Scholarship Fund Application for Camp Mont Shenandoah, Ltd.

Application Deadline: November 18, 2016 (NOT A POSTMARK DEADLINE)

***PLEASE NOTE, campers must be registered for the 2017 camping season, with a paid deposit to be considered for the Camp Spirit Scholarship by November 18, 2016. **Electronic submissions will not be considered.**

APPLICANT INFORMATION

Camper Name _____
Last
First
Middle
Preferred Name

Mailing Address _____

Permanent Address (if different than above) _____

County of Residence _____ School Name _____

Email _____ Home Telephone _____

Camper's Age as of June 24, 2017 _____

Number of years at Camp Mont Shenandoah:
 (Please distinguish between R&S years and 3/6 week years.) _____

Have you previously received The Camp Spirit Scholarship? () Yes () No If yes, when? _____

Session Attending: (Please select one)
 () 6 Weeks () 1st 3 Weeks () 2nd 3 Weeks () *Roots & Shoots*

If a repeat camper, please list the name of your previous summer CMS counselor(s). _____

NOTE: By providing the name of your previous summer camp counselor, you understand that a CMS Scholarship Committee Member may contact her to discuss your previous camp experiences.

FAMILY INFORMATION

Are the parents of the applicant solely responsible for paying the camper's tuition for the 2017 camping season? () Yes () No

****If you answered 'No' to the above statement please attach the other contributor's financial information (the same that is requested of parents).**

Name of father/stepfather/guardian _____

Occupation _____ Employer _____ Annual Income _____

Name of mother/stepmother/guardian _____

Occupation _____ Employer _____ Annual Income _____

Additional income received:

Other sources (alimony, child support, government benefits, etc.) \$ _____

List names and ages of siblings supported by the parent(s)/guardian(s)

Name	Age	Relationship to Applicant

EXTRACURRICULAR ACTIVITIES (Must be completed by all applicants. Please record your activities below.)

Activity	Honors, Awards, Recognitions, etc.	Participation Dates
School related (clubs, sports, student government, fine arts, etc.)		
Community & Personal (volunteer work, youth programs, sports, music, dance, choir, 4-h, hobbies, etc.)		

PERSONAL STATEMENT

- I. On a separate sheet of paper, please have the applicant/camper write a letter expressing why she wants to attend Camp Mont Shenandoah.

- II. On a separate piece of paper, the parent(s)/guardian(s) should:
 - a. Confirm their daughter’s desire to attend Camp Mont Shenandoah;
 - b. Describe her ability to make friends, be helpful and maintain a positive attitude in a community environment; and
 - c. Describe the aspects of her character that may fit with Camp Mont Shenandoah’s Five Virtues and 12 Laws of Woodcraft.

In addition, please include any financial need, whether the child is a legacy of CMS or other special circumstances/reasons for the child to attend camp. Financial need will be a primary focus of the Selection Committee whereas being a legacy or other special circumstances are not required to receive a scholarship but may be considered by the Selection Committee.

CERTIFICATION

The information provided in my application is, to the best of my knowledge, complete and accurate. I understand that false statements on this application will disqualify me from a scholarship.

Parent/Guardian Signature _____

Date _____

Camper Signature _____

Date _____

Please mail applications by November 18, 2016 (NOT A POSTMARK DEADLINE) to:

The Camp Spirit Scholarship
Community Foundation of Rockbridge, Bath and Alleghany
Attn: Dr. Pamela Minkler
1204 Regency Woods Place
Lynchburg, VA 24503
Electronic submissions will not be considered.