



Sulie & Pearl
Harand Camp
of the
Theatre Arts

Scholarship Fund
 Application Form

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Harand Camp is dedicated to making summer accessible for children or all backgrounds. To ensure this, we offer income based financial aid on a sliding scale and full scholarships to low and middle-income families. You must submit proof of income to receive a scholarship. This may be a copy of your most recent Federal tax return or combined family W-2's. You must complete and sign each applicable area of this application in order to receive funds. Upon Scholarship Award a \$100 camper tuition contribution will be requested.

Name of Child: _____ Grade Next Fall: _____ Age: _____

1. List reason for requesting Camp Scholarship

2. How will coming to Harand Camp benefit your child? Is there any other information about yourself or your child that you would like to include in this application?

3. List your significant expenses such as health insurance, automobile insurance, medical bills not covered by insurance, rent, mortgage, etc.

Description of Expenses: _____ Amount: \$ _____

Combined Family Income: \$ _____ /month x 12 = \$ _____ /year _____

Support or additional income: \$ _____ Total number of children/dependents in family _____

Level of Scholarship applying for:

Full Scholarship Half Scholarship Sliding Scale (you pay smaller fee based on your income)

Do you receive Public Assistance?

Yes, Please check each that applies and provide ID number.

Disability: _____ Medical: _____

Social Security: _____ Unemployment: _____

* Please also enclose an essay written by your child describing themselves and their background, their interest and experience in music, drama, dance or the technical aspects of Musical Theater. Why they feel Harand Camp would benefit them, and what they will bring to Harand Camp.

* I have read and completed all sections of this application above and the information provided is correct. I am submitting both my camp application, my scholarship application and essay for your consideration. I am also Providing you with copies of my documentation for proof of income.

 Signature of Parent or Guardian

 Print Name

 Date

PLEASE INCLUDE INCOME VERIFICATION AND ESSAY WHEN SUBMITTING THIS FORM