Girls Rock Math Scholarship Application 2019



Girls Rock Math has a limited number of full and partial scholarships for Summer Camp. Scholarship funds are offered so that children who otherwise could not afford to attend camps, can attend. Scholarships are awarded based on the applicant's need and interest in the camp. First time applicants will be given consideration over those who have previously received scholarships.

To Apply:

- Complete the application and save the file as: Child First Name Last Name Sch App
- Attach a scanned hand-written letter from the child explaining why she wants to go to camp (or as age appropriate a picture and limited writing)
- A Letter of Reference from a current teacher
 Please do not send additional materials

Scan and send your application to: camp@girlsrockmathematics.com and write "Scholarship Application" in the Subject line

Please be as comprehensive as possible in the information you give us. We will send a reply that your scholarship application has been received. Scholarships from Girls Rock Math are not guaranteed until you receive an approval letter. You are responsible for any remaining balance after the scholarship funds have been issued. You will not be reimbursed for payments made in advance of your scholarship approval. You will be notified of our decision no later than April 1, 2019.

Awards:

We will award \$150 scholarships and \$225 scholarships at the discretion of the scholarship committee and available funding. These funds may be used for up to two camps and may be applied to break camps and summer camp. We reserve spots specifically for scholarship candidates but it is possible you will not get your preferred location and/or date due to availability.

If you have questions, please contact Jessica Wexler at 206-226-9240

Eligibility Requirements:

- Must currently be in Kindergarten-5th grade
- A resident of Washington State
- All children must complete a separate application, even those in the same household



| Child's Full Legal Name: | | | | | | _ DOB: / / | |
|---|-----------------|-----------|---------------|------------------------|-----------|----------------------------------|--|
| Mailing Ad | dress: Stree | | | City | | | |
| Home Phor | ne | | | Cell Phone | e | | |
| Current Gro | ade Level | Sc | chool | | | | |
| Parent/Gud | ardian Comp | leting th | nis form: | | | | |
| Email: | | | | | | | |
| | | | | | | | |
| <u>Preferred Lo</u> | ocation and/ | or Date: | <u>s:</u> | | | | |
| Camp Location: Bainbridge Phinney Ridge | | | evue eline | Bothell U- District | | Central District West Seattle | |
| Camp Date | | - 10 | 7/00 07 | 7/00 0/0 | 0.45,0.40 | 0/10/0/1/ | |
| //8- | 12 //13 | 0-17 | //22-26 | 7/29-8/2 | 8/5-8/9 | 8/12-8/16 | |

Parent Responses:

What draws you to the Girls Rock Math program for your daughter?

What benefits do you see this program providing in your community?

| What are your child's greatest academic or personal strengths? |
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| How would you assess your child's math skills and interest? |
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| Does your child have any special needs or learning preferences we should be aware of? |
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| |
| We would like permission to share excerpts from your written responses to the and your child's |
| etter with donors. |
| Yes, you may share these materials |
| No, please use these materials only for the application process |
| |

| <u>Financial Information</u> | | | | | |
|--|--|--|--|--|--|
| Does your family receive any of the following services? | | | | | |
| School Lunch Program | | | | | |
| WIC | | | | | |
| Housing Assistance | | | | | |
| State Health Insurance (Apple Care, Medicaid, etc.) | | | | | |
| | | | | | |
| Number of people in the household: | | | | | |
| Annual Household Income: | | | | | |
| Under \$30,000 | | | | | |
| \$30,000 to \$40,000 | | | | | |
| \$40,001 to \$50,000 | | | | | |
| \$50,001 to \$60,000 | | | | | |
| \$60,001 to \$70,000 | | | | | |
| \$70,001 to \$90,000 | | | | | |
| \$90,000 and Over | | | | | |
| Have you been awarded a Girls Rock Math Scholarship in the past? | | | | | |
| Additional Information on your financial circumstances: | | | | | |
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| I certify that the above information is correct. | | | | | |