



LONGUE VUE
HOUSE & GARDENS

LONGUE VUE SUMMER

'SCAPES CAMP SCHOLARSHIP

APPLICATION

Deadline: April 19, 2019
Scholarship Notifications: by May 3, 2019

PLEASE COMPLETE THIS FORM AND SUBMIT TO:

Lauren Rouatt
Longue Vue House and Gardens
7 Bamboo Road
New Orleans, LA 70124

Summer 'Scapes Camp Scholarship Guidelines:

- *Camp tuition is \$225 for Longue Vue members and \$275 for non-members per week. Scholarship assistance is rewarded to cover 80% of camp tuition. Families rewarded scholarships will pay the remaining 20% of camp tuition, \$45 or \$55 respectively.*
- *Incomplete applications will not be reviewed.*
- *Scholarships will be awarded based on need and merit.*
- *Applicants are evaluated without regard to race, religion, natural origin, sex, or physical ability.*
- *Funding is limited and scholarships are not guaranteed to all applicants.*
- *Scholarships exclude before and aftercare.*

Please fill out one application form per child.

Name of Child _____ Birthdate ____/____/____

Grade _____ School _____

Please select the camp week you are applying for. If making multiple selections, please number your choices by priority (1=highest priority):

- | | |
|---|---|
| <input type="checkbox"/> <i>June 3-7: Outer Space (Ages 8-10)</i> | <input type="checkbox"/> <i>July 8-12: Creative Collage (Ages 5-7)</i> |
| <input type="checkbox"/> <i>June 10-14: Water World (Ages 5-7)</i> | <input type="checkbox"/> <i>July 15-19: Natural Connections (Ages 5-7)</i> |
| <input type="checkbox"/> <i>June 17-21: Plant Life! (Ages 5-7)</i> | <input type="checkbox"/> <i>July 22-26: Drama in the Garden (Ages 8-10)</i> |
| <input type="checkbox"/> <i>June 24-28: Art Adventures (Ages 5-7)</i> | <input type="checkbox"/> <i>August 5-7: Young Naturalists (Ages 8-10)</i> |

REQUIRED FAMILY INFORMATION

1st Parent or Legal Guardian _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Email _____

Place of Employment _____

Occupation _____

2nd Parent or Legal Guardian _____

Address (if different) _____

City _____ State _____ Zip _____

Phone (_____) _____ Email _____

Place of Employment _____

Occupation _____

FINANCIAL INFORMATION

Please indicate your total annual household income from all sources (including wages, interest income, investments, alimony, child support, social security, public assistance):

- | | | |
|--|--|--|
| <input type="checkbox"/> Below \$10,000 | <input type="checkbox"/> \$30,001-\$35,000 | <input type="checkbox"/> \$55,001-\$60,000 |
| <input type="checkbox"/> \$10,001-\$15,000 | <input type="checkbox"/> \$35,001-\$40,000 | <input type="checkbox"/> \$65,001-\$70,000 |
| <input type="checkbox"/> \$15,001-\$20,000 | <input type="checkbox"/> \$40,001-\$45,000 | <input type="checkbox"/> \$70,000+ |
| <input type="checkbox"/> \$20,001-\$25,000 | <input type="checkbox"/> \$45,001-\$50,000 | |
| <input type="checkbox"/> \$25,001-\$30,000 | <input type="checkbox"/> \$50,001-\$55,000 | |

Does your child qualify for free or reduced lunch? Yes / No (circle one)

How many children currently live in the household? _____ Adults? _____

Please list their ages: _____

Are there any extenuating circumstances, permanent or temporary, that make financial assistance necessary at this time?

Please provide information about your camper (interests, academic or community achievements, etc.).

Has anyone in your family previously received assistance through our program? Yes / No (circle one)

If yes, please specify the type and history of assistance.

All the information in this application is true and complete to the best of my knowledge.

Parent/Guardian Signature

Date