EAGLE VILLAGE

WHERE POTENTIAL SOARS

5044 175TH AVENUE · HERSEY, MICHIGAN 49639 · PHONE 231·832·2234

Scholarship Application Form

Parent/Guardian Name(s): _____

Address: _____

City: _____ County: _____ State: _____ Zip: _____

Phone: _____ Email Address_____

Camper Name(s) Camp Program

1. _____

2. _____

Have you asked other agencies or your church for assistance? ○ Yes ○ No

Name of Agency/Church_____

If yes, how much are they willing to contribute? $_____

If no, why not? _____

Total family size: _____

Yearly income from all sources: $_____

Amount you will contribute: $_____

Amount of scholarship requested: $_____

To be considered for a scholarship you must include a copy of the first page of your previous year tax return.

Scholarships generally cover part of the cost, but not the full tuition. Most scholarships cover up to 50% of a camp session. If there are extenuating circumstances that increase your need for financial assistance, please explain.

_____

_____

_____

_____

I certify that all the information contained on this form is true and complete to the best of my knowledge.

_____ _____

Signature of Parent/Authorized Person Date

_____ _____

Name of Parent/ Authorized Person Email Address of Parent/ Authorized Person