

# The Works Museum Camp Scholarship Application

Thank you for your interest in camp at The Works. You can register for camp and apply for scholarships at the same time. There are no deadlines for application, but camps fill quickly and scholarship funds are limited, so please apply early.

Scholarship is limited to two half day camps and one Friday Fun Day per child.

Please call The Works at (952) 888-4262 with any questions or for more information. **Please mail this form, along with your registration form and payment to: The Works, Attn: Camps, 9740 Grand Ave. S., Bloomington, MN 55420**

If camp is full and we are unable to accommodate your child, we will return payment to you.

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50% scholarship: If your child or your family receives free/reduced price lunch at school, or assistance from SNAP, TANF, MFIP, WIC, SSI, Section 8 housing, Medical Assistance or Medicaid (not Minnesota Care) your child is eligible for a 50% scholarship.

Please check the program your family participates in and sign the form. Mail the following to The Works (see address above):

- A copy of proof of enrollment in the program you checked **or** a copy of your most recent Federal tax return
- Camp enrollment form
- Payment for the camp requested

_____ TANF	_____ SNAP	_____ Free or reduced lunch program
_____ MFIP	_____ Section 8 housing	_____ Medical Assistance
_____ WIC	_____ SSI	_____ Medicaid (not Minnesota Care)

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25% scholarship: A limited number of camp scholarships for 25% off camp fees are available for other families in need of assistance, based on financial status and availability of funds.

\_\_\_\_\_ total family gross yearly income      \_\_\_\_\_ number of children in family

\_\_\_\_\_ most recent monthly gross income for your family

\_\_\_\_\_ other income (child or spousal support, student grants)

Additional information concerning your financial situation (optional)

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The information I have provided on this form is correct. I understand that all information is kept strictly confidential and has been requested for the sole purpose of establishing financial need for camp scholarships.

\_\_\_\_\_  
Signature of parent or guardian

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date