



Anderson Arts Center C.R.E.A.T.E. Workshop Scholarship Application 2021

Camper and Parent Information:

Camper's Full Name: _____

Parent/Guardian's Name(s): _____

Relationship to Camper: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ Email: _____

Emergency Contact Name: _____

Phone: (____) _____ - _____ Relationship to Camper: _____

Camper's Age: _____ Grade: _____ School: _____

Allergies: _____

Please circle camper shirt size: Adult: S M L XL

Week Interested in attending:

[] Week 1 July 19th – 23rd

All scholarships are for **one five day week of teen camp**.

Camper Hobbies, Interest, and Extra Curricular Activities: _____

Camper Academic honors and awards (if applies): _____

Financial Information:

Number in Household _____ Do you qualify for free or reduced school meals? _____

Estimated Annual Household Income:

- | | | |
|--|--|--|
| <input type="checkbox"/> Under 10,000 | <input type="checkbox"/> \$30,000 - \$40,000 | <input type="checkbox"/> over \$60,000 |
| <input type="checkbox"/> \$10,000 - \$20,000 | <input type="checkbox"/> \$40,000 - \$50,000 | |
| <input type="checkbox"/> \$20,000 - \$30,000 | <input type="checkbox"/> \$50,000 - \$60,000 | |

Please include with this application one of the following documents as proof of income:

- most recent pay stubs most recent personal bank statement most recent tax return W-2

List any extenuating circumstances (home mortgage, medical bills, indebtedness, additional dependents, etc.) that you consider relevant to demonstrating your financial need.

Has this camper been awarded a scholarship for our camp in the past? _____

Why does this camper deserve an Art Camp Scholarship: _____

Yes _____ No _____

Mail or email completed application and proof of income to:

Tracy Weiss,
Exhibition Curator and Program Director
Anderson Arts Center, 110 Federal Street, Anderson, SC 29625
tracyw@andersonarts.org