



The Bishop Museum of Science and Nature
2020 Summer Camp Scholarship Application

201 10th Street West
Bradenton, FL 34206

Please include this form with your summer camp registration.

Camper Name: _____

School Camper Attends: _____

Parent/Guardian Name: _____

Have you previously received a camp scholarship? YES NO

If yes, what year(s)? _____

of adults in household: _____ # of dependents in household: _____

Gross annual household income (circle one):

<\$20,000 \$20,000-\$30,000 \$30,001-\$40,000 \$40,001-\$50,000 \$50,001-\$60,000

Are you or someone in your family currently receiving financial aid or scholarships from other sources? If so, please check all that apply:

Free and Reduced Lunches AFDC SNAP SSI

Other (Please specify): _____

To complete your scholarship application packet, please include the following:

- 1) A letter from your child explaining why he/she wants to attend camp (1 page or less)
2) A teacher/coach/community leader recommendation (template provided). The recommendation may be submitted with your packet or mailed separately by the recommender.

I certify that the above information is accurate, and the scholarship funds are necessary for the applicant to be able to attend this program.

Parent/Guardian Signature: _____ Date: _____

Please submit the completed scholarship packet to Susan McCarthy via mail or email at the contact information below. Scholarships are awarded on a first-come, first-serve basis to those who fit the requirements. Incomplete packets will not be considered.

Please contact Susan McCarthy at (941) 216-3459 with any questions or concerns

Mail to: The Bishop, P.O. Box 9265, Bradenton, FL 34206, ATTN: Susan McCarthy
Or e-mail to: SMcCarthy@BishopScience.org