

**GREEN LAKE LUTHERAN MINISTRIES CAMPER SCHOLARSHIP APPLICATION**

9916 Lake Ave. So., Spicer, MN 56288

Attn: Camp Registrar

Email: tlagergren@gllm.org

**Please complete all questions. This scholarship cannot be used in conjunction with "early discount" offers from the camps.**

**CONTACT INFORMATION**

Camper Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Church Name: \_\_\_\_\_ City: \_\_\_\_\_ Church Phone#: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Pastor's email address: \_\_\_\_\_

(We will be contacting your Pastor for a reference. Please provide requested information)

**CAMP PROGRAM** First Choice \_\_\_\_\_ Week # \_\_\_\_\_ Dates: \_\_\_\_\_

Second Choice \_\_\_\_\_ Week # \_\_\_\_\_ Dates: \_\_\_\_\_

**SCHOLARSHIP INFORMATION**

1. Have you received a scholarship from us in the past? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, when? \_\_\_\_\_
2. Does your church offer scholarships? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, what amount? \_\_\_\_\_
3. What is your household gross annual income? \$ \_\_\_\_\_
4. Total number of children living at home? \_\_\_\_\_
5. Scholarship amount you are requesting? \$ \_\_\_\_\_
6. How much will you be able to pay for this week of camp? \$ \_\_\_\_\_
7. Would you be willing to make monthly payments after camp? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, how much do you think you could afford on a monthly basis? \$ \_\_\_\_\_

Please list all financial circumstances that you would like to have considered as a basis for recommending this camper for a scholarship. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How will your child benefit from this camping experience? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_

Please return this form along with the completed registration form and payments, if any, to the address listed above. If you have questions, contact us at 320-796-2181.

**OFFICE USE ONLY**

Date Received: \_\_\_\_\_ Amount Approved: \$ \_\_\_\_\_ Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian notified: Date: \_\_\_\_\_ Email \_\_\_\_\_ Mail \_\_\_\_\_ By: \_\_\_\_\_