



## Summer Academy Scholarship Application

Applications due April 1, 2018

**Scholarships are available for students enrolling in one of the following full day pricing packages. Please mark all of the programs your student would like to attend.**

- Session 1 – Full Day: Includes three weeks of morning academic programming, social hour, and subsequent afternoon creation & exploration program.
- Session 2 – Full Day: Includes three weeks of morning academic programming, social hour, and subsequent afternoon creation & exploration program.
- Session 3 – Full Day: Include sports camp, social hour, and subsequent afternoon creation & exploration program
- Session 4 – Full Day: Include STEAM camp, social hour, and subsequent afternoon creation & exploration program

Student Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade in Fall: \_\_\_\_\_

Gender: M / F Ethnicity: \_\_\_\_\_ School Name (currently enrolled at): \_\_\_\_\_

Name of Parent(s) or Legal Guardian(s): \_\_\_\_\_

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

Cell Phone(s): \_\_\_\_\_ Work Phone(s): \_\_\_\_\_

Home phone: \_\_\_\_\_ Email(s): \_\_\_\_\_

**Monthly Household Income from ALL sources:**

**GROSS**

**NET**

Earnings (Salary, Wages, Commissions, etc.) \_\_\_\_\_

Agency Subsidy (Welfare, Social Security, etc.) \_\_\_\_\_

Other (Alimony, Child Support, etc.) \_\_\_\_\_

Please list total number of adults and children living on income represented here: \_\_\_\_\_

**Please Provide a Copy of Income Verification (W-2, Paystub, Voucher, SSI, etc.) with this application.**

**\*This information will be kept confidential and used only in determining financial eligibility.**

In order to make more scholarships available, we ask that you consider requesting a partial scholarship.

I request a 25% scholarship

I request a 50% scholarship

I request a 75% scholarship

Do you need extended care?  Yes  No

**In the space below, please describe the ACADEMIC reasons for requesting these funds.**

**In the space below, please describe the FINANCIAL reasons for requesting these funds. Include any extenuating financial circumstances (medical, job loss, unusual expenses, etc.) or significant family expenses, including college and day school tuitions.**

When complete, please drop off at the Academy's main office or mail to:

Academy of Whole Learning, ATTN: Kaitlin Walsh, 3500 Williston Road, Minnetonka, MN 55345