



2021 VINS Nature Camp Scholarship Information & Application

VINS believes that all children should experience the wonders of our natural world and engage in learning experiences in the outdoors. The purpose of the VINS Nature Camp Scholarship Fund is to provide all interested youth an opportunity to attend camp, regardless of their family's financial circumstances.

About:

- Financial aid and scholarships are available for **one week of camp per child** and awarded on a first come, first serve basis.
- Scholarships are available for both day and overnight camp programs.
- All information is confidential and kept securely within our organization.
- If applying for aid for more than one child, please complete a separate application for each.
- Notification of scholarship awards will be made no more than 30 days after receipt of your application.

Scholarship Levels:

- **Financial Aid:** Request up to \$100.00 in financial aid for your camper(s) week of camp.
- **Partial Scholarship:** Pay what you can afford for your camper(s) week of camp and request a partial scholarship to cover the remaining portion of the camp fee.
- **Full Scholarship:** Request funding to pay the full cost of your camper(s) week of camp.

To Apply:

1. Complete and submit the VINS Nature Camp Scholarship Application. If requesting a Full or Partial Scholarship, the Agency Referral section of the application **must** be completed. VINS Nature Camp does not ask scholarship applicants to submit financial information. The Agency Referral serves as a third party attesting to a family's need for financial support. Agency Referrals can be made by individuals or organizations such as a school counselor, community group, benefits coordinator, or social services agency.
2. If requesting Financial Aid or a Partial Scholarship, payment for your portion of the camp fee **must** be included with the application. In the event that scholarship funds are no longer available, you will be refunded any payments made.
3. Send forms and payment (if applicable) to:

Mail: VINS Nature Camp
Vermont Institute of Natural Science
PO Box 1281
Quechee, VT 05059

Email: camps@vinsweb.org
Fax: (802) 359-5001



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Camper's Name: _____ Camper's Grade in Fall 2021: _____
 Camper's Date of Birth: _____ Camper's Gender: M F
 Parent/Guardian Name(s): _____
 Address: _____
 Town/State/Zip: _____
 Home phone: _____ Work Phone: _____
 Mobile Phone 1: _____ Mobile Phone 2: _____
 E-mail 1: _____ E-mail 2: _____

*** All registration communications are electronic.***

Please indicate reason for scholarship or financial aid request:

- | | |
|---|--|
| <input type="checkbox"/> Fixed or limited income | <input type="checkbox"/> Illness or injury in family |
| <input type="checkbox"/> Job loss or change in job status | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Change in family structure | |

Camp Details: Many of our camps fill quickly and we cannot guarantee a spot in your preferred week of camp. Be sure to include a second choice in the event that your first camp selection is full.

Camp Selection (1 st Choice):	Location:	Date:
Camp Selection (2 nd Choice):	Location:	Date:

A. Camp Fee:	\$ _____
	-
B. Amount of Scholarship Request:	\$ _____
	=
C. Amount owed today (A minus B):	\$ _____

Payment Method:	
Credit Card:	or
Card #:	Exp. Date:
Name on Card:	CVV #:
Signature:	

Check Enclosed:
 Make check payable to:
 Vermont Institute of
 Natural Science

Additional Information: This information helps VINS raise funds to support our scholarship program.

Why do you want your child to attend VINS Nature Camp this summer?

Number of children attending VINS Nature Camp in 2021:

Have any children in your household previously attended VINS Nature Camp? Yes No

Does your child currently receive free or reduced price school meals? Yes No

How did you hear about VINS Nature Camp?

Previously Attended	Friend/Family	Facebook
School	Web Search	Other (Please describe):

Acknowledgement: I certify that the above information is true and correct. I understand that this information is being given for the receipt of scholarship funds only and that this application will be kept confidential.

Parent or Guardian Signature

Date

Printed Name of Parent or Guardian

Agency Referral (this section required for Full or Partial Scholarship requests)

For Referring Agent:

The above applicant is requesting a scholarship to attend a week of VINS Nature Camp. The purpose of the VINS Nature Camp Scholarship Fund is to provide all interested youth an opportunity to attend camp, regardless of their family's financial circumstances. During the scholarship application process, VINS Nature Camp does not ask families to disclose financial information. Instead, families must submit a referral from a third-party attesting to their need for assistance in paying for a week of camp. Your role as a Referring Agent is to serve as that third-party.

By referring this child to receive support from the VINS Nature Camp Scholarship Fund you are affirming that, to the best of your knowledge, this family would not otherwise be able to afford to send their child to a week of VINS Nature Camp.

Signature of Referring Agent

Printed Name of Referring Agent

Position Title

Agency Mailing Address

Agency Phone Number

Agency E-mail Address