

YSI Summer Camp Confidential Financial Assistance Application

- YSI is dedicated to making summer science programs accessible to children of all backgrounds.
- Priority is given to children who are referred to us by schools and partner agencies. Secondary priority is given to individual families who are self -referred.
- You may request up to 3 camps per child. We reserve the right to limit the number of camp scholarships per child or per family, to ensure the greatest possible number of children is served.
- We will make every effort to confirm camps no later than two weeks prior to the start of camp, and to accommodate your specific camp request. Camp spaces are subject to availability, in some cases, you may be offered an alternate camp choice.
- Scholarship requests are filled on a first-come, first-served basis until all available funds are utilized. Apply early!
- There is a \$25 fee for each scholarship week awarded, per camper to cover administrative costs.

Name(s) of child(ren) and age(s):
Primary	y Adult:
	Name
	Address Phone Number
	Thore Number
(1) Lis	t reason(s) for requesting Camp Scholarship.
(2) Are	there any other factors that we should take into consideration in evaluating your need for assistance?
Combir	ned household income (all sources) per month: \$
Please	attach appropriate qualifying documents, such as:
1)	Current federal tax return
2)	Two of the most recent pay stubs from primary and secondary adult (if applicable)
3)	AFDC and SSI recipients include a copy of disbursement voucher
4)	Title 1 Free/Reduced Lunch Verification
5)	Details and amounts of income or assistance you currently receive for:
	Unemployment
	Child Support/Alimony
	Social Security (SSI)
	Pension/Retirement
	Disability
	Other



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Number of children / dependents	s in your household:	
I am submitting my signed financi information provided is correct.	ial assistance application for you	r consideration, and certify that the
Signature of Parent or Guardian	Print Name	///
Street Address	City, State	Zip Code
Phone Number	Email Address	

Please mail or email application to:

Youth Science Institute | Attn: Summer Camp Scholarships

Address: 296 Garden Hill Drive Los Gatos, CA 95032

Phone: (408) 356-4945 | camp@ysi-ca.org



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Availability

Please list your camper's availability and Camp Theme Example:	e preferences. We will do our best to accommodate your request	
A) Child's Name: Mae Jemison	Grade in Fall 2024: κ	
Preferred Dates of Camp	Preferred Camp Theme	
(1) 6/24/24-6/28/24	Preferred Camp Theme: Investigators Camp	
A) Child's Name:	Grade in Fall 2024:	
Preferred Dates of Camp (1) / 2024 / 2024	Preferred Camp Theme for the corresponding week	
(2)/ / 2024/ / 2024		
(3)/ / 2024/ / 2024		
B) Child's Name:	Grade in Fall 2024:	
Preferred Dates of Camp	Preferred Camp Theme for the corresponding week	
(1)/ / 2024/ / 2024		
(2)/ / 2024/ / 2024		
(3)/ / 2024/ / 2024		
C) Child's Name:	Grade in Fall 2024:	
Preferred Dates of Camp (1) / 2024 / 2024	Preferred Camp Theme for the corresponding week	
(2)/ / 2024/ / 2024		
(3)/ / 2024/ / 2024		
D) Child's Name:	Grade in Fall 2024:	
Preferred Dates of Camp	Preferred Camp Theme for the corresponding week	
(1)/ / 2024/ / 2024		
(2)/ / 2024/ / 2024		

(3) ____/ ___ / 2024 - ____ / 2024 _____