

Creative Cauldron Scholarship Application

Scholarships are available for children attending summer camps or workshops with Creative Cauldron. A few guidelines apply:

- 1) Recipients must be residents of Fairfax County or the City of Falls Church.
- 2) Scholarships are based on financial need.
- 3) Each child may attend, and receive scholarships for, a maximum of two camps or workshop sessions per year.
- 4) Camp or workshop registration is on a first-come, first-served basis; applying for a scholarship does not affect your status.
- 5) Scholarship requests are confidential.
- 6) Creative Cauldron appreciates (but does not require) letters of support from applicant families upon completion of the camp or workshop session, as these aid us in our efforts to raise funds for future scholarships.

Instructions

- 1) Fill out this form and email it to Creative Cauldron, Inc.
P.O. Box 2424
Falls Church, VA 22042

If we have room in the camps for which you are applying and enough scholarship funds to cover your request, you will receive a confirmation, by phone or email. If we have room in the camp(s) or workshop(s) but our scholarship fund is depleted, we will call you with further instructions.

Name of Child/Children _____

Name of Parent/Guardian _____

Home Address & Zip Code _____

Phone (day) _____ (evening) _____ (cell) _____

Camp(s) or workshops for which you are applying:
(Before and After Care apply to summer camps only)

	Before Care?		After Care?		Total Fees	Amount You Can Pay
	Yes	No	Yes	No		
1 st Choice: _____	_____	_____	_____	_____	\$ _____	\$ _____
2 nd Choice: _____	_____	_____	_____	_____	\$ _____	\$ _____
3 rd Choice: _____	_____	_____	_____	_____	\$ _____	\$ _____

Number of people in your household _____

Household gross income (check one):

- Less than \$30,000 \$30,000 - \$40,000 \$40,000 - \$50,000
 \$50,000 - \$60,000 \$60,000 - \$75,000 More than \$75,000

Any other factors you would like us to consider: _____

By signing below, I affirm that the information I have provided is true and correct.

Signature _____ Date _____