



# FRIENDS OF CAMP CONCORD

Supporting Camp Concord at Lake Tahoe

## SCHOLARSHIP APPLICATION

### To be completed by Parent(s)/Guardian(s) of Camper:

This portion of the application should be completed by the parent(s)/guardian(s) of the camper. This information will be kept strictly confidential and will only be used to determine eligibility for awarding Friends of Camp Concord camp scholarships.

#### A. PARENT/GUARDIAN INFORMATION:

##### Parent/Guardian #1

NAME

ADDRESS

CITY

STATE

ZIP

PHONE

EMAIL ADDRESS

##### Parent/Guardian #2

NAME

ADDRESS

CITY

STATE

ZIP

PHONE

EMAIL ADDRESS

#### B. CAMPER INFORMATION:

If you are applying for more than one child—prepare individual applications and submit together.

NAME

ADDRESS

CITY

STATE

ZIP

BIRTHDATE

AGE AT CAMP

GRADE AT CAMP

#### Pronouns:

☐ He/Him/His ☐ She/Her/Hers ☐ They/Them/Theirs



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### With whom does the applicant live?

☐ Mother Only ☐ Father Only ☐ Both Parents ☐ Grandparent ☐ Other Relative ☐ Legal Guardian ☐ Foster Home

Total number of people in applicant's household? \_\_\_\_\_

Has your camper ever been to Camp Concord? ☐ YES ☐ NO If yes, what years? \_\_\_\_\_

Has your camper ever received a scholarship to attend FOCC camp as an individual or as part of a group?

☐ YES ☐ NO

If yes, how many scholarships have they received to attend Camp Concord and with what organization? Ex: C.A.R.E.S, Pittsburg Unified, Child Advocates of Contra Costa County, First Tee Contra Costa, Future Leaders of America, etc.

### C. FINANCIAL NEED:

Why do you need financial assistance and how will this scholarship help you send your youth to camp?

What amount of scholarship would you like to receive? ☐ 100% ☐ 50% ☐ Other

If your child does not receive a full scholarship are you able to contribute any amount to attend camp?

☐ YES ☐ NO

In 2024, did your family or household receive benefits from any of these federal benefits programs?

Check all that apply:

☐ Cal Fresh/SNAP/Food Stamps ☐ Medi-Cal ☐ Section 8 Housing ☐ WIC (Women Infants and Children)  
☐ Temporary Assistance for Needy Families (TANF)

If you checked any of the federal benefits program boxes, please proceed to Section E. If you checked any of the above, please provide a copy of approved documentation with this application.

### D. TAX INFORMATION:

What Income Tax return was filed or will be filed for the 2024 year?

☐ IRS 1040 ☐ IRS 1040A ☐ 1040EZ ☐ Foreign tax return ☐ Tax return with Puerto Rico or other US Territory

What is your family's adjusted gross income for 2024? \_\_\_\_\_

Adjusted Gross Income is on IRS form 1040 Line 37, 1040A Line 21 or 1040EZ Line 1

Parent/Guardian 1's earnings from working in 2024? \_\_\_\_\_

Parent/Guardian 2's earnings from working in 2024? \_\_\_\_\_

Total amount of Income Tax paid for 2024? \_\_\_\_\_

Total Exemptions for 2024? \_\_\_\_\_

Exemptions are on IRS form 1040 Line 6d or 1040A Line 6d. On the 1040 EZ, if a person checked either the "you" or "spouse" box on Line 5 use EZ worksheet line to determine the number of exemptions (\$3900 equals one exemption). If a person didn't check either box, enter 01 if he/she is single or 02 if he/she is married.

Please provide a copy of 1099s and/or W2 forms to provide total income for 2024. Blackout SSNs before submitting. Your application will not be considered without these documents attached.



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### E. AUTHORIZATION AND SIGNATURES:

The Friends of Camp Concord scholarship committee meets after the February 16 submission deadline to process applications. Friends of Camp Concord reserves the right to discontinue financial aid at any time if the information provided is inaccurate. Partial scholarships may be awarded based on the decision by the Friends of Camp Concord scholarship committee. Parents/guardians will be responsible for the remaining fees based on the amount of scholarship awarded.

I, the applicant, have read and agree to the terms of the Friends of Camp Concord scholarship policy and any requirements outlined in this application.

I am requesting that (camper) \_\_\_\_\_ be considered for a scholarship. Everything I have stated in this application is true. I understand that you will retain this application. I agree to answer questions and supply any information that the Friends of Camp Concord scholarship committee requests.

We hereby request financial aid from Friends of Camp Concord:

X \_\_\_\_\_ /      /  
PARENT/GUARDIAN SIGNATURE      PRINT NAME      DATE

X \_\_\_\_\_ /      /  
PARENT/GUARDIAN SIGNATURE      PRINT NAME      DATE

Submit your signed and completed application between January 5 and February 13, along with the required documentation: copies of federal benefits programs checked above and/or a copy of 1099s and/or W2 forms with SSNs blacked out.

Submit applications by email to: [YouthCamp@friendsofcampconcord.org](mailto:YouthCamp@friendsofcampconcord.org) or by mail to: **Scholarship Applications, Friends of Camp Concord Youth Camp, P.O. Box 6373, Concord, CA 94524-1373**. The application must be **received** by February 13.

Completing an application does not guarantee a scholarship to camp. If your camper is selected to receive a scholarship, you will be notified via email.

Questions about the application process? Email [YouthCamp@friendsofcampconcord.org](mailto:YouthCamp@friendsofcampconcord.org).



## SCHOLARSHIP APPLICATION

The Camper can write their story below, or submit a video. Video submission guidelines are on page 5.

NAME \_\_\_\_\_

**In your own words, tell us why you would like to go to Camp Concord.**

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



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### G. CAMPER VIDEO SUBMISSION GUIDELINES:

If your camper would like to submit a video on why they would like to attend Youth Camp, the below guidelines apply. Submitted videos will only be viewed by the FOCC scholarship committee and will not be used or shared for any other purposes. Do not submit the completed scholarship application until the camper video has been uploaded.

- » Video should be no longer than 2-minutes
- » Video must be created for the sole purpose of the scholarship application
- » Video can be created using a cell phone, digital camera, camcorders, etc.
- » We are looking for a narrative in your campers own words why they would like to go to Youth Camp at Camp Concord. We are not requiring the video to be theatrical or include props.
- » The video should not include copyrighted material such as music, logos, etc.
- » Video entry must not be derogatory, offensive, threatening, defamatory, disparaging and libelous or contain any content that is inappropriate, indecent, sexual, profane, impolite, slanderous or discriminatory in any way.

### Parent/guardian to upload the video to

- » **YouTube** Set the privacy setting to "Unlisted"
- » **Google** Link must be set to "Viewer" privileges

Provide YouTube or Google URL of video: \_\_\_\_\_

Do not submit the completed scholarship application until the camper video has been uploaded.

**For the scholarship application, I have provided my camper permission to create a video on why they want to attend Youth Camp at Camp Concord.**

X \_\_\_\_\_ /      /  
PARENT/GUARDIAN SIGNATURE      PRINT NAME      DATE