



# CAMP SCHOLARSHIP APPLICATION

County of Residence: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Your Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone#/Email: \_\_\_\_\_

**Camp Information:** Scholarships will be awarded for any summer camp or summer program, not just autism specific camps. For example, the Scholarship could be applied toward "Kids' and Teen College" at the College of Southern Maryland. Scholarship award will be up to, but shall not exceed, \$150.00.

Name of Camp: \_\_\_\_\_

Camp Section/ID# (if applicable or known): \_\_\_\_\_

Date(s) of Camp: \_\_\_\_\_

Total Cost of Camp: \_\_\_\_\_

Is child already registered?  Yes  No

Name of Camp Point of Contact: \_\_\_\_\_

\*Camp Contact Phone# and Email: \_\_\_\_\_

\*Camp Payment Address: \_\_\_\_\_

\_\_\_\_\_

**\*Application information and proof of autism diagnosis must be provided for the application to be processed.** There are a limited number of camp scholarships, up to \$150.00 each, available for individuals with autism in Calvert, Charles, and St. Mary's counties. **Scholarships will be awarded on a first come, first served basis (by postmark or email or online time stamp).** Families are eligible to apply for a camp scholarship every three (3) years. Families who have received a camp scholarship at any time since January 1, 2017 will not be eligible for a scholarship award in 2019.

**\*Application and diagnosis must be received no later than 11:59 PM on May 25, 2019.** All applicants must provide proof of an autism spectrum disorder (e.g., front page of IEP, letter from doctor on official letterhead). *Please mail completed application forms and supporting documents to: Autism Spectrum Support Group of Southern Maryland, PO Box 2162, California, MD 20619 or email application packet to [info@autismsupport-somd.org](mailto:info@autismsupport-somd.org).* Recipients of scholarship awards will be notified by phone or email no later than June 1, 2019. Scholarship monies will be paid directly to camp or program designated above once proof of registration is verified. **We do not provide reimbursements to parents.** If you have already paid for camp, it is **your responsibility** to verify with the camp that monies you have paid would be refunded to you. Monies are not paid or refunded to you if your child fails to attend the camp.

For office use only:

Postmark Date	Date of Prior App/ Eligible?	<input type="checkbox"/> Diagnosis received	<input type="checkbox"/> Registration verified	Award check # and date
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NOTES: