



United Way
of Greater Waterbury

GREATER WATERBURY CAMPSHIP PROGRAM
2018 Scholarship Application for 1 Free Camp Session

Enter Name of Camp: _____

Deadline: Friday, May 11, 2018 (submit to ONE of the participating camps listed on flyer)

- To qualify for the Greater Waterbury Campership Program Campers must reside in the United Way of Greater Waterbury ten-town area (Bethlehem, Cheshire, Middlebury, Prospect, Southbury, Thomaston, Waterbury, Watertown, Wolcott, and Woodbury).
- Child must turn age 5 by June 1, 2018 (proof required)
- For households that do not receive SNAP benefits **PLEASE SEE FINANCIAL GUIDELINES BELOW**; Proof of household income must be submitted upon completion of this application (example-2 recent paystubs, benefits letter, W2, etc). **Please black out Social Security numbers listed on documents.**
- All SNAP recipients must provide proof of current SNAP benefits.
- Awarded campers will receive 1 free camp session at 1 participating camp, per year.
- Camperships will be awarded on a first come, first serve basis, while funding is available

PRINT CLEARLY - ONE APPLICATION PER CHILD

I. General Information

Child's Name: _____

Birthdate: _____ Age: _____ Girl: _____ Boy: _____

Parents/Guardian/Foster Parents Name: _____

Street Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Cell: _____

Household: # of adults at this address: _____ # of children at this address: _____

II. Annual Household Income Information:

If you receive Food Stamps (SNAP) benefits, provide your 9 digit Food Stamp (SNAP) ID # _____

If you **DO NOT** receive Food Stamps (SNAP) benefits, write your Gross Family Income-before deductions: \$ _____

Other Income (child support, disability, unemployment, DCF) \$ _____ (Circle) weekly / bi-wkly / monthly / yearly

Income Guidelines Based on FY 2017-18 Federal Poverty Level

Family Size	Gross Annual Income May Not Exceed
1	22,459
2	30,451
3	38,443
4	46,435
5	54,427
6	62,419
7	70,411
8	78,403
9	86,395
10	94,387
Add \$7,992 for each additional	

I certify that the information on this application is accurate and complete. I understand that any misrepresentation will make my child ineligible for campership funding. I authorize the above named agency to verify my public assistance status with the Department of Social Services.

Signature of Parent/Guardian/Foster Parent: _____ Date _____

(Application must be signed and dated in order to be valid)

III. Camp Certification

I certify that based on birth date, income documents/SNAP verification provided, the above named applicant meets the eligibility requirements for the Greater Waterbury Campership Program. I understand that any misrepresentation may result in my agency being ineligible for campership funding. Signature of Camp Administrator: _____ Date _____

(Application must be signed and dated in order to be valid)