

**One In A Hundred Inc.**

Dear Parent/Guardian:

Please fill out the attached form if you are seeking a scholarship for One In A Hundred Summer Camp this summer. The scholarship program is subject to program capacity, demonstrated need and our ability to fund this assistance.

Please note:

* Scholarships are awarded on a first-come, first-served basis until the monies are depleted. Scholarship applications are reviewed monthly between January and April.
* All scholarship applicants must contact us before applying so we can make an initial determination regarding your child’s fit for our camp. This will avoid your spending time completing the scholarship and camp applications if One In A Hundred is not the right place for your child.
* Receipt of a scholarship does not guarantee your child will be accepted as a camper. Once you are notified of an award camp registration procedures will be followed with your child interviewed by the Camp Director. Following the interview a final decision will be made.
* Your request will be treated individually, anonymously and confidentially.

The following documents must be submitted for scholarship consideration:

* Completed Scholarship Application
* Copy of your 2015 Federal 1040 Form
* Copy of your 2016 Federal 1040 Form (if you are unable to submit this return please let us know)
* Copy of the most recent paycheck stub for each wage earner in the household
* Completed 2017 One In A Hundred Camp Registration Application with required attachments.

An application missing any of the above documents will considered incomplete and cannot be considered for a scholarship.

If possible please scan the applications and required documents and send to us via email or Drobox. Or, you can mail your application to:

Scholarship Evaluation Committee

One In A Hundred Inc.

2218 N. Monticello

Chicago, IL 60647

Any questions? Call us at (847) 461-9230 or email at [info@oneinahundredprogram.com](mailto:info@oneinahundredprogram.com)



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2218 N. Monticello

Chicago, IL 60647

(847) 461-9230

info@oneinahundredprogram.com

**Camp Scholarship Application**

Date of Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part 1: Family Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Mother’s Name: |  | Father’s Name: |  |
| Address: |  | Address: |  |
| City, State, Zip: |  | City, State, Zip: |  |
| Home Phone: |  | Home Phone: |  |
| Cell Phone: |  | Cell Phone: |  |
| Work Phone: |  | Work Phone: |  |
| Email: |  | Email: |  |

Main contact for scholarship purposes: 🞏 Mother 🞏 Father

Number of people in household: \_\_\_\_\_\_\_\_ Number of dependent children: \_\_\_\_\_\_\_\_

**Part 2: Child Information**

Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_(D.O.B\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

Gender: 🞏 Male 🞏 Female Grade in Fall: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part 3: Financial Information**

***Father:***

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gross Annual Income: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Marital Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Annual Income (child support, Alimony, Disability, SSI): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Mother:***

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gross Annual Income: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Marital Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Annual Income (child support, Alimony, Disability, SSI): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Part 4: Deposit and Scholarship Amount**

It is required that you pay a $500.00 deposit when you submit the Scholarship Application and Camp Registration Form.

What percentage of scholarship are you requesting?

🞏 Up to 25% of camp registration fee

🞏 26% - 50% of camp registration fee

🞏 51% - 75% of camp registration fee

**Part 5: Narrative Information**

Please describe any extenuating or special circumstances that make it difficult for you to pay the full camp fee. Please be specific. This statement is a critical part of the committee’s review process. The more detailed you are, the better the committee can address your need.

The information included in this application is correct to the best of my knowledge.

Date: \_\_\_\_\_\_\_\_\_\_ Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Include the following documents with your completed Scholarship Application:**

* **Copy of your 20154 Federal 1040 Form**
* **Copy of your 2016 Federal 1040 Form**
* **Copy of the most recent paycheck stub for each wage earner in the household**
* **Completed 2017 One In A Hundred Camp Registration Application with required attachments**