



## Corpus Christi Museum of Science and History Summer Camp Scholarship Application 2019

1900 N. Chaparral St.  
Corpus Christi, TX 78401  
(361) 826-4667

Dear CCMSH Scholarship Applicant:

CCMSH awards scholarships based on the child's financial need. Scholarships are limited; a scholarship application does not guarantee a spot in the camp program. Scholarships are awarded for one week only. CCMSH will award two kinds of scholarships: either a full cost award (valued at \$300) or a partial cost award (valued at \$150). Any applicants that are awarded a partial cost scholarship will be required to pay the remaining balance at least one week prior to the week the child is registered. Please note the camp counselors will not know which campers are on scholarship and which are not.

The following four documents must be submitted for scholarship consideration:

1. Application. Please indicate if you want a full cost or partial cost award.
2. A copy of the parent or legal guardian's 2018 or 2017 tax return (please black out all Social Security numbers)
3. A current letter from the child's school stating they receive free or reduced lunch **Or** Copy of Medicaid or CHIP Assistance
4. Letter of Recommendation from an individual outside of applicant's immediate family.

Only complete applications will be considered. The information submitted will be reviewed thoroughly by a committee and kept confidential. All scholarship materials must be received by May 17, 2019 at 5:00pm.

If you are awarded a scholarship, you will be notified by May 24, 2019 at 5:00pm. If all scholarship monies have been awarded, your application will be placed on a waiting list and you will be notified if one becomes available. If you have any questions, please feel free to call (361) 826-4655 or (361) 826-4661.

Thank you,

Jonathan Garza  
Camp Director



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(361) 826-4667

### Applicant Information (please print legibly)

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

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Parent's or Legal Guardian's Occupation: \_\_\_\_\_

Child's Name: \_\_\_\_\_

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

Grade child will have completed in June 2019: \_\_\_\_\_

Zip code of child's primary residence: \_\_\_\_\_

School child attended in 2018-2019 school year: \_\_\_\_\_

### Attach additional form if needed.

Total Combined Household Income for the Year of 2018 (circle one)

- \$0 - \$9,999
- \$10,000 - \$14,999
- \$15,000 - \$24,999
- \$25,000 - \$49,999
- \$50,000 - \$74,999
- \$75,000+

Race/Ethnicity (optional) (circle those that apply)

- White (non-Hispanic)
- Hispanic/Latino
- African American
- American Indian or Alaska Native
- Asian
- Native Hawaiian and Other Pacific Islander

How did you hear about our scholarship application? (Circle one)		
Website	Staff	Camp Flyer
Word of Mouth	Repeat Camper	
Facebook	Member	
Other:		

I hereby certify that the above statements are true and correct: \_\_\_\_\_ (Please Sign)

### **Application Submission**

To keep this form confidential, please submit it one of the following ways:

**Via Mail:** Place completed application in a sealed envelope addressed to:

Attn: **Jonathan Garza, Camp Director**  
Corpus Christi Museum of Science & History  
Summer Scholarships  
1900 N Chaparral St.  
Corpus Christi, TX 78401

**In Person:** 361) 826-4661 or (361) 826-4655—ask for Jonathan Garza

**Via Email:** Please scan all forms and send in one document to JonathanG2@ccmuseum.com.

**Please Note:** Regular business hours are Tuesday – Saturday 10:00am-5:00pm and Sunday 12:00pm- 5:00pm. Applications mailed in must be received by **May 17, 2019 at 5:00pm.**