SCHOLARSHIP REQUEST FORM

Each year, CranHill raises funds to assist as many families as possible with the cost of attending camp through our *Camper Scholarship Fund*. Primarily, these scholarship dollars come from donors to our ministry who value the camp experience and want to share that with others. We desire to help as many campers attend summer camp as possible and to be good financial stewards with the limited funds we receive each year. All applications for scholarship funds are kept strictly confidential.

Before completing this form, please **contact your church** to see if they participate in our *Sponsorship Voucher System*. Many churches have joined us and agreed to pay for a percentage of a camper's registration fee for families. Using this system allows us to use more of our scholarship funds for families without church ties. Many churches may also have their own assistance program for sending children to a Christian camp as part of their value for Christian formation for youth. We encourage all families to approach their church and any applicable agencies first to seek other assistance.

These camps are enjoyed by hundreds of campers each season and provide a fun, challenging, and well-rounded camp experience. Families can enroll in specialty camps if they desire, but we still base the scholarship on the lowest-priced camp.

Here are some things to consider as you fill out your Scholarship Request Form.

- CranHill Camper Scholarships are only available for overnight camps. **Day Camp and Friendship Camp are not eligible.**
- You can register for any overnight camp available (including specialized); however, CranHill Camper Scholarships are generally based on standard overnight camp experiences.
- Scholarship amounts will vary depending on funds available within the Camper Scholarship Fund.
- Other discounts that have already been given during your online registration process are factored in when considering the total amount of the scholarship that will be awarded.
- In general, scholarships (including any CranHill discounts) greater than $250 per camper are extremely rare.
- More common scholarship grants, including CranHill discounts, fall in the $100 - $250 range.
- If your income has changed since your last tax return (job loss, illness, separation), tell us. We look at your circumstances, not only the numbers.
- CranHill may ask for additional information to confirm household size or income. A scholarship may be reduced or withdrawn if information is incomplete or inaccurate.

Who counts in your household? Families come in all shapes and sizes, and we are not here to judge anyone's home. Because these gifts are given by donors to help transform young lives, we need an accurate picture of **everyone who lives in your home**, whether or not you are related and whether or not you file taxes together. That includes a spouse, boyfriend, girlfriend, or live-in partner, grandparents and other relatives, adult children, roommates, and all children. We count the income of **every adult in the home (18 and older)**, not only the parent or guardian signing this form. If someone in your home truly keeps separate finances, or your situation is complicated, please tell us on the form.

To Request a Scholarship:

1 – **Register** your child for camp at **www.cranhillranch.com**. This will ensure that a place in the desired camp session is available and held for you while the Scholarship Request Form is processed. A $50 deposit is required at registration.

2 – **Complete this Scholarship Request Form** and return it to CranHill for consideration.

3 – **Include a copy of the first page of the most recent tax return for every adult in your home.** Married couples filing jointly send one return. An adult who did not file may send two recent pay stubs or a current benefit letter instead; an adult with no income may simply enter $0 on the form. Please black out Social Security numbers. Only **completed** scholarship forms, with **current** documents for the household, will be considered for a scholarship. Your documents are seen only by those reviewing scholarships and are destroyed once a decision is made. If another adult in your home cannot provide these, please contact our Registrar before sending your form.

4 – **You will be notified** (via email) of any scholarship amount awarded, and an updated financial statement will be sent to you. Any remaining balance will be due before the beginning of the camp session.

5 – Once notified of the scholarship amount awarded, if you decide not to continue with your registration (*and you let us know that decision before June 1*), **your camp deposit can be refunded**.

CranHill Attn: Registrar 14444 17 Mile Road Rodney, MI 49342

CRANHILL
Transforming Lives!

SCHOLARSHIP REQUEST FORM

This application cannot be considered without the completion of **ALL** required information.
Register online prior to submitting this form to ensure that you have a place in camp.

Parent/Guardian Name(s) _____

Address _____

City, State, Zip _____

Email Address(s) _____

Best Phone(s) _____

Child 1 Name: _____ Camp Week Attending: _____

Child 2 Name: _____ Camp Week Attending: _____

Child 3 Name: _____ Camp Week Attending: _____

Everyone Who Lives in Your Home

List every person living at this address right now, related or not, whether or not they are on your tax return.

Adults (18 and older)

Name (start with yourself)	Age	Relationship to camper	Employer or source of income	Yearly income before taxes	Proof enclosed
				$	☐ Tax return ☐ Other
				$	☐ Tax return ☐ Other
				$	☐ Tax return ☐ Other
				$	☐ Tax return ☐ Other
				$	☐ Tax return ☐ Other

Children (under 18)

Name (include campers)	Age	Lives in the home	Claimed on whose tax return?
		☐ Full time ☐ Part time	
		☐ Full time ☐ Part time	
		☐ Full time ☐ Part time	
		☐ Full time ☐ Part time	
		☐ Full time ☐ Part time	

Other Household Income

Many kinds of income never appear on a tax return. Please list yearly amounts for anyone in the home, and write 0 if none.

Child support received $ _____ Social Security, SSI, or disability $ _____

Unemployment $ _____ Regular help from family or others $ _____

Total yearly household income (all adults, all sources) $ _____

Does anyone in the home receive Food Assistance (Bridge Card) or Medicaid? ☐ Yes ☐ No

** **To be considered for a scholarship, you must include the first page of the *most recent* tax return for every adult in your home, or the other documents described on page 1.**

Please explain the circumstances that led you to request scholarship assistance. Include any change in income since your last tax return, and anyone listed who keeps separate finances. Use additional paper if needed.

_____

_____

_____

_____

Church Name _____ Church Member? ☐ Yes ☐ No Have you asked them for financial assistance? ☐ Yes ☐ No If yes, how much are they willing to contribute? $_____ If not, why? _____	Have you asked other agencies for assistance? ☐ Yes ☐ No Name of agency: _____ If yes, how much are they willing to contribute? $_____ If not, why? _____

Please list any and all other camps this camper will be attending this summer at CranHill or other locations: _____
_____

Someone outside your family who knows your situation (pastor, youth leader, teacher, caseworker). CranHill may contact this person.

Name _____ Relationship _____ Phone _____

What dollar amount are you requesting?	$

I certify that all the information contained on this form is true and complete to the best of my knowledge, that every person living in my home is listed and all household income is included, and that the funds being applied for are truly needed due to financial hardship. I understand that CranHill may ask for additional information, and that a scholarship may be reduced or withdrawn if the information is incomplete or inaccurate.

_____ _____ _____

Parent/Guardian Signature Print Parent/Guardian Name Date

CRANHILL OFFICE USE BELOW THIS LINE

RCVD:	Acct #:	Camp Session:
Prev. Scholarships Award $:	Church/Agency Name:	Church/Agency $ Applied:
Adults listed: Children listed:	Proof received for all adults? Yes No	Tax return year(s):
Total household income: $	Follow-up needed? Yes No	Documents destroyed (date):
Amount already paid by parent:	CranHill Discounts Applied:	Amount Awarded:
CHR Staff Name:	Remainder to be paid by parent:	Reference contacted? Yes No