



## SUMMER SCHOLARSHIP APPLICATION FORM

Please **PRINT** all information

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

Address \_\_\_\_\_

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

Evening phone \_\_\_\_\_ Daytime phone \_\_\_\_\_ Cell \_\_\_\_\_

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

Number of Siblings \_\_\_\_\_ Age of Siblings \_\_\_\_\_

Scholarships are awarded on the basis of financial need. Please complete the following information. All information given on this form is strictly confidential.

Family size \_\_\_\_\_

Yearly gross Income (Include all sources for the last 12 months) \_\_\_\_\_

Monthly Housing Costs: Rent/Mortgage \$\_\_\_\_\_ Electric/Gas \$\_\_\_\_\_ Water/Garbage \_\_\_\_\_

Unusual expenses \_\_\_\_\_

Special Needs of the child or family \_\_\_\_\_

How much do you feel you could pay for your child to attend ODP? \_\_\_\_\_ per week

What year do you anticipate your child will enter Kindergarten? \_\_\_\_\_

Additional comments: Please list any other considerations we should be aware of \_\_\_\_\_

Weeks you would like your child to attend Open Door Summer Camps (circle all that apply)

June 13-15

June 20-22

June 27-29

Please return this form in person or send to:

Marja Steinberg  
Open Door Preschool  
409 Highland Avenue  
Northfield, MN 55057