



Office Use

Date Received: _____

**GREATER WATERBURY CAMPERSHIP PROGRAM
2024 Scholarship Application for 1 Free Camp Session**

Enter Name of Camp: _____

Deadline: Friday May 17, 2024 (ONLY SUBMIT TO ONE of the participating camps listed.)

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, 2024 (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 served basis, while funding is available.

PRINT CLEARLY - ONE APPLICATION PER CHILD

I. General Information

How did you hear about the Campership Program? ___ School ___ Agency/Camp ___ Newspaper ___ United Way ___ Family/Friend

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: (Documents must be provided as proof)

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) \$ _____ (Check) weekly bi-wkly monthly yearly ___

Income Guidelines Based on FY 2024 Federal Poverty Level

Family Size	Gross Annual Income May Not Exceed
1	\$30,120
2	\$40,880
3	\$51,640
4	\$62,400
5	\$73,160
6	\$83,920
7	\$94,680
8	\$105,440
9	\$116,200
10	\$126,960
Add \$10,760 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 to be valid)