

## Heritage STEM Camps Financial Assistance Application

### Contact Information

Parent or Guardian Name \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Address: Street Address \_\_\_\_\_

Address Line 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Country \_\_\_\_\_

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

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

### Income

Annual Household Income: \_\_\_\_\_

Household Size: \_\_\_\_\_

### Assistance Request

Which program is your child attending?

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Location: \_\_\_\_\_

Amount of assistance requested: \_\_\_\_\_

(Note: Priority given to partial scholarships)

**Please complete page 2 with requested student information.**

## Heritage STEM Camps Financial Assistance Application

### Student Information

Student Name \_\_\_\_\_

Gender: \_\_\_\_\_

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

Ethnicity: \_\_\_\_\_

### Education

School Name: \_\_\_\_\_

Grade Level: \_\_\_\_\_

Grade in Science/Math Courses: \_\_\_\_\_

Please list any honors/awards, or relevant academic accomplishments:

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**Statement of Interest:** In order to help us learn about you, please attach a brief Statement of Interest (<250 words) detailing your interest in science and technology and why you want to participate in Heritage STEM Camps.

### Recommendation:

Please provide the name and email address of 2 teachers to complete a recommendation form on your behalf.

Recommender #1 Name: \_\_\_\_\_ Email: \_\_\_\_\_

Recommender #2 Name: \_\_\_\_\_ Email: \_\_\_\_\_