**STRAWBERRY JAM CAMP**

**YOUTH SCHOLARSHIP APPLICATION**

|  |  |
| --- | --- |
| Name: |  |
| Age: |  |
| Address: |  |
| City: |  |
| State & Zip Code: |  |
| Telephone: |  |
| Email: |  |

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| What instrument(s) do you play and how long have you been playing this instrument? |
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| What are your personal goals for your chosen instrument(s)? |
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| Why do you think you would be a good Strawberry Jam Camp Scholarship recipient? |
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| Please list two references, name, phone number & email address. |

|  |  |
| --- | --- |
| Name: |  |
| Phone Number: |  |
| Email Address: |  |

|  |  |
| --- | --- |
| Name: |  |
| Phone Number: |  |
| Email Address: |  |

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| Are there other members of your family attending Strawberry Jam Camp or the Songwriter’s Workshop? |
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| Are you applying for a: Full-Scholarship Half-Scholarship |

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| Would you be able to attend if you do not receive this scholarship? Please explain: |
|  |

All applications MUST be received by **June 15, 2023**.

Applications can be:

* snail mailed to: Strawberry Jam Camp Scholarships, PO Box 400, Strawberry Point, IA 52076
* email to: [strawberryjamcamp@windstream.net](mailto:strawberryjamcamp@windstream.net)

**These Scholarships are made available through the generosity of the Upper Mississippi Gaming Corporation and Individuals who have donated to the Strawberry Jam Camp Scholarship Fund.**

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