STRAWBERRY JAM CAMP
VETERAN SCHOLARSHIP APPLICATION

Name:	
Age:	
Address:	
City:	
State & Zip Code:	
Telephone:	
Email:	
Branch of Service:	
Dates of Service:	

Which workshop are you completing the scholarship for? *Please select only one.*

☐ Instrument Workshop

☐ Songwriters Workshop

ANSWER ONLY **ONE** OF THE FOLLOWING:

1. What instrument(s) do you play? *Instrument Scholarship*

	✔ If Primary		✔ If Primary
☐ Banjo	☐	☐ Guitar	☐
☐ Dobro	☐	☐ Mandolin	☐
☐ Fiddle	☐	☐ Bass	☐

2. How long have you been writing songs? *Songwriter's Scholarship*

☐ Newby, zip, zero, no experience
☐ _____ Years *(please fill in # of years)*

What are your personal goals for your instrument(s) or song writing?

Why do you think you would be a good Strawberry Jam Camp Scholarship recipient?

Are you applying for a:	Full-Scholarship	Half-Scholarship

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

Please list two references, name, phone number & email address.

Name:	
Phone Number:	
Email Address:	

Name:	
Phone Number:	
Email Address:	

All applications MUST be received by **June 15, 2026**

Applications can be:

- ✔ snail mailed to: Strawberry Jam Camp Scholarships, PO Box 400, Strawberry Point, IA 52076
- ✔ email to: strawberryjamcamp@gmail.com

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.

UPPER MISSISSIPPI GAMING CORPORATION