

Next Generation Day Camp School Age Programs, LLC

1809 W Atkinson Ave

Milwaukee, WI 53206

414-921-8108

Provider #: 1000589201 Loc #: 001

Scholarship Application & Guidelines

Next Generation Day Camp (NGDC) awards scholarships, when available, to attend our summer camp and before & after school programs for youths ages 3 through 13. The intent of the scholarship program is to provide equal access to the programs that NGDC offers throughout the year.

Scholarship Awards Recipients will receive either a full or partial scholarship (10%-50%) based on eligibility. Scholarships are reviewed and granted on a first-come, first-serve basis until all available funds are used. Scholarships do not include snacks, field trips, lunch, or transportation to and from NGDC. Camp registrations are limited to space available in requested camps. Recipients and their instructors may be asked to complete an evaluation after completion of the scholarship.

Eligibility requirements: Applicants must be Wisconsin residents or residing in Wisconsin at the time of attending. Scholarships are based on financial need (please refer to the tables below). Scholarships will be reviewed every June. Proof of reduced or free lunch will be accepted for proof of income verification. In addition please highlight the number of people in your household as well as your income range. You must be honest on your application, failure to do so will result in immediate removal from the program and well as reimbursement of services rendered. Incomplete applications will not be reviewed. There is no cash value for scholarships, and we do not offer credits or transfers.

Number of people in household	Income Range
1	0-24,000
2	24,001-36,000
3	36,001-48,000
4	48,001-60,000
5	60,001-72,000
_____	75,000+

Parent Name _____ Child's Name _____ Date _____

Next Generation Day Camp School Age Programs, LLC

1809 W Atkinson Ave

Milwaukee, WI 53206

414-921-8108

Provider #: 1000589201 Loc #: 001

Date: _____

CHILD{REN} NAME(S): _____

PARENT/GUARDIAN NAME: _____

ADDRESS _____ CITY: _____ ZIP: _____

COUNTY: _____ PHONE: _____

EMAIL: _____

What is your annual household income? _____

How many family members are part of your household? _____

Do you qualify for any government programs (food stamps, Medicaid, etc.)? [Yes] [No]

If yes, please indicate which programs you receive:

—

Have you received a scholarship from the NEXT before? [Yes] [No]

In order to receive future grant awards from different organizations, it is required that we track the ethnicity of our scholarship students.

Thank you for indicating your ethnicity or cultural background:

Caucasian [] African American [] Asian [] Hispanic/Latino [] Native American [] Other []

Please specify: _____

ESSAY

Why do you want to participate in Next Generation Day Camp Programs? How will the scholarship assist you?

—

—

Scholarship applications are reviewed on a first-come-first-serve basis. By signing this application you acknowledge all the information provided is accurate and you understand that false information can lead to the prepayment of services or immediate removal of programs with no refund.

_____Printed _____Signature _____Date