

SKYVIEW RANCH

CAMP SCHOLARSHIP APPLICATION

Skyview Ranch is excited to offer scholarship assistance for campers! We do not want a single camper to miss the best week of their life or what God wants to do in them.

Those who sincerely need financial assistance are encouraged to apply for scholarship. Funds are reserved for those potential campers who have the greatest need.

Skyview recommends contacting the pastor of your local congregation about any scholarship assistance your church may have.

FOUR Steps to Scholarship Assistance:

1. **First You...**
 - a. Complete and return the enclosed Application.
 - b. Include a copy of your most recent IRS 1040.
 - c. Give **2** Reference Forms to non-relatives, including your pastor.
2. **Then We...**
 - a. Determine scholarship eligibility, once we receive your application, 1040 and both references.
 - b. Notify you by mail of any aid we will provide, if we accept your application.
3. **Finally You...**
 - a. Call or email Skyview to accept your scholarship.
4. **After Camp...**
 - a. Send us 2 Thank You notes for the donors who provided your scholarship.

IMPORTANT NOTES:

- Completed applications, 1040, and references must be received by Skyview at least 2 weeks before camp to ensure processing time.
- It may be helpful to confirm with your references that they have sent in their paperwork.
- Feel free to call or email the Ranch office at any time to check the status of your application.
- **While we do our best to help as many campers as possible, not all applicants will receive aid. Please wait to hear from Skyview before anticipating assistance.**



7241 Township Road 319
Millersburg, OH 44654
330.674.7511
FAX: 330.674.4606
Email: camp@skyviewranch.org
www.skyviewranch.org



CAMP SCHOLARSHIP APPLICATION

Camper's Name (one camper per application)

Birth date (M/D/Y)

Street Address/City/State/Zip Code

(_____) _____
Home Phone Number

Camp name/date planning to attend

Name of Local Church/City

Father/Male Guardian Information:

Name

(_____) _____
Phone Number

Street Address/City/State/Zip Code (if different than above)

Occupation

Email

Mother/Female Guardian Information:

Name

(_____) _____
Phone Number

Street Address/City/State/Zip Code (if different than above)

Occupation

Email

Scholarship Information:

Annual Household Income: _____

Number of Persons in Household: _____

Scholarship amount for which you are asking Skyview Ranch: _____

Have you attended Skyview Ranch Summer Camp before? Yes No

Will there be other children from your family attending the Skyview Ranch Camp programs?
 Yes No

If yes, how many children? _____ Which camp weeks? _____

Signature of Parent/Legal Guardian

Date

For Office Use Only

- Application
- Reference
- Reference
- Thank You Letters

Send application and reference letters to:
Skyview Ranch 7241 Township Road 319 Millersburg, OH 44654