

# Walters Award Application: Form Y

Grant based on **financial need**. This is a full scholarship for a two-week session of Discovery Camp. The Walters Award also includes the cost of lunch for the entire session. This form is ONLY for applicants in Kindergarten or 1<sup>st</sup> Grade.

## Part 1: Personal Information

Child's Name: \_\_\_\_\_ Gender: M F  
(circle one)

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Grade Level: \_\_\_\_\_

School Name and Address:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Parent / Guardian Information:

(1) Name: \_\_\_\_\_

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

(If different from above)  
\_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

(2) Name: \_\_\_\_\_

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

(If different from above)  
\_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

**Part 2: Financial Information**

1. If you qualify for free lunch, currently receive public assistance, social security benefits, or similar benefits, check yes below and skip to Part 3 of this application. If not, go to question #2.

**YES** (Please attach official documentation to support your affirmation.)

2. How many dependents do you claim on your income tax record? \_\_\_\_\_

3. Please send copies of the items Column B. In Column C, print the total monthly expense for each item in Column A. You should provide as much detail about your expenses as possible, as this will establish your level of need for assistance.

A	B	C
<b>Income</b>	2 pay stubs/direct deposit receipts (most current for all parents in the household)	
<b>Housing Expenses</b>	most current rent receipt or canceled check for rent or mortgage payment	
<b>Utilities</b>	most current phone, gas electric, water, & sewage bills	
<b>Childcare/Tuition</b>	current month's receipt on facility letterhead or canceled check	
<b>Transportation</b>	canceled check for car payment & insurance or automatic deduction receipt*	
<b>Food</b>	approximate monthly expenses	
<b>Medical Expenses</b>	approximate monthly expenses	
<b>Other Necessities</b>	approximate monthly expenses	

\* If you do not have a car, please list your approximate public transportation expenses.

Total monthly income (from column C, line 1 above) \$ \_\_\_\_\_

Total monthly expenses ( total column C, lines 2-8) \$ \_\_\_\_\_

4. Subtract monthly expenses from income \$ \_\_\_\_\_

5. If there have been any drastic changes in your financial status that you would like to explain, please do so on the lines below.

\_\_\_\_\_

\_\_\_\_\_

**Part 3: Session Preferences**

Listed below are the dates and topics for each session of camp:

\_\_\_\_\_ **Hungry? The Science of Food June 30 – July 11 (no camp July 4th)**

\_\_\_\_\_ Playground Physics  
\_\_\_\_\_ A Pirates' Life for Me  
\_\_\_\_\_ It's Not Easy Being Green

July 14 - July 25  
July 28 - August 8  
August 11 - August 22

In the blanks above, please choose which session you would like to attend. Write a 1 next to the session you would most like to attend. Number the others to show your 2<sup>nd</sup>, 3<sup>rd</sup>, & 4<sup>th</sup> choices. We will do our best to accommodate your interests.

**Part 4: Essays**

**Short Answer**

*Applicant should draw the answers on the enclosed sheets.*

1. Draw a picture of what a scientist does?
2. Draw a picture of something you would invent if you were a scientist?
3. Draw something in science that we could not live without.

**Part 5: Other Activities and Awards**

Do you take part in any of the following?an after-school program

- dance school
- Girl Scouts or Boy Scouts
- Church Youth Group
- Choir
- Band
- Volunteer Program
- Sports
- a Club \_\_\_\_\_
- Babysitting
- Other \_\_\_\_\_

Have you won any awards or honors? If you did, list their names and what they were for?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Part 6: Statement of Honor**

I hereby state that all the information enclosed in this application is true, and that no documents have been altered, forged, or falsified.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian's signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Part 7: Application Package Checklist**

**Double check your application by using the checklist below. Have you:**

Numbered the session(s) you would like to attend according to preference?

Completed the short answer drawings on the sheets provided?

Signed and dated the Statement of Honor?

Enclosed (2) sealed and completed Adult Evaluation Forms?

Enclosed official copies of all your report cards from both last school year (2006-2007) and this school year so far (2007-2008)?

Enclosed official notification of your attendance record from both last school year (2006-2007) and this school year so far (2007-2008)?

Completed and enclosed the Discovery Camp Registration Contract

Signed and dated the acknowledgement below?

I have read and fully understand the steps necessary for submission of applications to the Discovery Camp scholarship program. I am aware that I may only submit one application per child and that no late or incomplete applications will be considered. I understand that all decisions are final.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ALL items listed in the above checklist must be submitted by the deadline to be considered for this award. Submit your entire application package by April 25, 2008. Late or incomplete entries will not be considered. Send your application package to:**

The Franklin Institute  
Discovery Camp: Scholarships  
222 North 20th Street  
Philadelphia, PA 19103-1194

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# **What does a scientist do?**

**Question # 1**

**NAME** \_\_\_\_\_

# **If I were I scientist I would invent...**

Question # 2

**NAME** \_\_\_\_\_

# **We could not live without...**

Question # 3

**NAME** \_\_\_\_\_

