

Brantwood Camp

PO Box 3350
Peterborough NH 03458

603-924-3542
brantwoodcamp@gmail.com

Scholarship Application

Camper Name (First & Last): _____

Parent/Guardian Name (First & Last): _____

Are you applying for a **Full** or **Partial** Scholarship? (*circle one*)

If applying for a Partial Scholarship, what amount are you requesting for this Camper's Tuition?

Are you partnering with or receiving assistance through any of our current Sponsor Organizations/Partners?

- ☐ Community Center of Northern Westchester
- ☐ DCF MA
- ☐ DCF NJ
- ☐ Grand Monadnock Rotary Club
- ☐ Explore Middle School
- ☐ Link Community
- ☐ Steps to Success
- ☐ Roxbury Prep
- ☐ Other:

☐ If you selected "Other", please provide more information on the organization, partner, or person: _____

Please provide the last four digits of your (parent/guardian) Social Security Number: _____

Please note this is for internal use only and does not disqualify you from the scholarship process

Parent/Guardian Signature: _____

Date: _____