



Jean Connor Scholarship Application

STUDENT INFORMATION

STUDENT'S NAME

AGE

GRADE

TEACHER

MALE

FEMALE

STUDENT SEX

STREET

TOWN

STATE

ZIP

1. PARENT/GUARDIAN NAME

HOME PHONE

WORK PHONE

CELL PHONE

2. PARENT/GUARDIAN NAME

HOME PHONE

WORK PHONE

CELL PHONE

CAMP INFORMATION *Please attach information regarding camp/activity*

NAME OF CAMP/ACTIVITY

LOCATION

START DATE

FEE

APPLICANT HOUSEHOLD INFORMATION

NUMBER OF ADULTS IN HOUSEHOLD

NUMBER OF CHILDREN IN HOUSEHOLD

GROSS YEARLY INCOME

OTHER INCOME

Include social security, welfare, child support, alimony

HOW MUCH CAN YOU
CONTRIBUTE TOWARD THE
CAMP FEE

YES

NO

ELIGIBLE FOR
FREE/REDUCED LUNCH

ARE THERE OTHER FINANCIAL CIRCUMSTANCES TO BE CONSIDERED? *If YES explain above*

FOR THE STUDENT: On a separate sheet of paper, tell in your own words why you want to attend this camp/activity. (Younger children may dictate to an adult.)

SIGNATURE OF ADULT HOUSEHOLD MEMBER

DATE

PLEASE RETURN APPLICATION FORM TO

Connor Scholarship Application
Dr. Frederick N. Sweetsir School
104 Church Street Merrimac, MA 01860