



Birmingham Youth Assistance

2024 Summer Camp Scholarship Application—Part 1

The information provided here will be kept confidential. It will be used for program evaluation purposes only. This form and its contents will be maintained by Birmingham Youth Assistance (BYA), not the Birmingham Public School District.

APPLICANT INFORMATION- One per child

Today's Date: _____

Child's Name: _____ Date of Birth: _____

Child's School: _____ Child's Grade: _____

Parent's Name(s): _____ Phone Number: _____ Cell: _____

Address: _____ City: _____ Zip Code: _____

Email: _____

Referred by: _____ Referral Phone #: _____

Write Head of household first, adults and then the children, Everyone who currently lives in the house must be listed

Name (first & last)	Relationship to child	Child's Age	Sex M/F	Child's School	Grade	Adult Work Status * (see below) *

* Adult Work Status—FT=Full Time PT=Part Time U=Unemployed H=Homemaker R=Retired S=Full time Student

TOTAL Household income level: Please include payments from all sources.
 \$0-\$20,000 \$20,000-\$40,000 \$40,000-\$60,000 \$60,000- \$80,000 \$80,000 +

Please list all sources of income (check and list all that apply)
 wages unemployment child support Social Security (yours or the child's) AFDC /DHHS Alimony
 other: please list _____

Did the child qualify for Free or Reduced Lunch in school year 2022-2023? Free _____ Reduced _____

Child's Ethnicity (statistical purposes only) Caucasian Asian African-American Bi-racial
 Native American Pacific Islander Other: _____

Any additional information regarding additional financial obligations or circumstances? _____

Please provide a copy of your Federal Income Tax Return for 2022 & 2023 or W2(s).

****Incomplete applications will not be processed****

2024 BYA Summer Camp Scholarship Application—Part 2

Child must reside within the Birmingham School District boundaries.

You MUST be able to provide transportation for your child to and from camp.

Has your child received a scholarship from BYA in the Past? _____ If Yes, date received? _____

Does your child have any special needs or behavioral concerns?

() YES () NO If yes, please describe: _____

What benefits do you expect from this program for your child? _____

Would your child benefit from other BYA services? _____

CAMP INFORMATION

All camp information below must be provided for application to be considered

Name of Camp/Program/Session _____

Day camp _____ Overnight Camp _____

Camp schedule:

Start Date: _____ End Date: _____

Number of hours per session: _____ Number of days per week: _____

Total cost of the activity: _____ **Contribution of family:** _____

Dollar amount Requested: _____ Amount Received from other sources _____

You will be asked to contribute to your child's camp experience based upon your indicated level of income.

Name of Organization to make check payable to: _____

Street Address to Send check to: _____

City: _____ State: _____ Zip: _____

Phone Number of Agency: _____ Contact person: _____

**The camp experience often costs \$250 - \$350 for one week of day camp
and \$400 - \$450 for one week of overnight camp.**

Scholarships paid to camp provider ONLY.

Scholarships will be considered for one day camp or one overnight camp per child.

Affidavit Required for Federal Subsidized Grant

APPLICANT'S CERTIFICATION: The applicant certifies that all information in this application, and all information furnished in support of this application, is true to the best of the applicant's knowledge and belief. Penalty for false or fraudulent information see: U.S.C. title 18, Sec. 1001

SIGNATURE: _____ DATE: _____

PRINT NAME: _____

2024 BYA Summer Camp Scholarship Application—Part 3

Birmingham Youth Assistance—Summer Camp Guidelines

- ◇ Child must reside within the Birmingham Public School District boundaries.
- ◇ Camps do not provide bus transportation unless indicated. You must be able to provide transportation for your child to and from camp
- ◇ Camps will be considered for one Day Camp or one Overnight camp per child.
- ◇ You will be asked to contribute to your child’s camp experience based upon your indicated level of income. The camp experience often costs \$250 - \$350 for one week of day camp and \$400 -\$450 for one week of overnight camp.
- ◇ Parents are responsible for registering their child.
- ◇ Camp scholarships will be paid to the camp provider only. Notification of the child’s scholarship award will be sent to parents and selected camp program.

Summer Camp Check-Off List

Everything must be completed and included to be considered.

- _____ 2024 Summer Camp Scholarship Application—Part 1 completely filled out
- _____ 2024 Summer Camp Scholarship Application—Part 2 completely filled out, signed, and dated
- _____ 2024 Summer Camp Scholarship Application—Part 3
- _____ 2023 Federal Income Tax Return or W2
- _____ 2022 Federal Income Tax Return or W2

Please return the completed forms to the BYA office by

Friday, May 10, 2024

If we receive your application after the due date your child will be placed on a waiting list. Also, camp spots are limited so please contact the camp as quickly as possible to see about availability.

Mail **completed forms** and **all financial documentation** to:



BIRMINGHAM YOUTH ASSISTANCE
2436 W. LINCOLN
BIRMINGHAM, MI 48009
or email to: office@birminghamyouthassistance.org

We WILL NOT process incomplete applications

Questions can be directed to the office at Phone # 248-203-4300
or EMAIL office@birminghamyouthassistance.org