The Office of Recreation Services at Ball State University is proud to offer the **Cardinal Kids Camp Scholarship Program** to benefit children from verified low-income households.

**Cardinal Kids Camp** is our popular recreational-based day camp that takes place each summer. Children in grades **K-8** (ages 5 - 13) who participate in Cardinal Kids Camp are offered safe and fun activities such as swimming, sports, arts and crafts, and games in a safe and supervised environment.

Five children will be selected to participate in each of the nine sessions (dates in lower left) If interested, please complete all information on the reverse side of this form and return it to:

**Office of Recreation Services**
Attn: Matt Miller
1700 Neely Ave.
SRWC 201F
Ball State University
Muncie, IN 47306

*Preferred to scan and email application*  
Matt Miller  
mgmiller@bsu.edu

**Scholarship Details**

- Full or Half Day registration fees provided
- Transportation, lunch, and early or late extended feeds are not included in the awarding of the scholarship.
- Parents or guardians of selected campers will be notified at least one week before the session the child will attend. At this time, parents/guardians must confirm the child’s attendance for that week.
- *CKC Scholarship Application and parent/guardian copies of the most recent W2’s and previous’ year tax copies must be submitted by 05/18/2018.*
- Completing this application does not guarantee a scholarship.
- The Office of Recreation Services will contact parents/guardians of selected campers.
- Once a camper has been notified of an awarded scholarship, a parent/guardian must complete a CKC Registration Form.

**For Further questions, please contact:**
Matt Miller
Assistant Director of Programs  
Recreation Services  
Ball State University  
Phone: (765)285- 7974  
E-mail: mgmiller@bsu.edu
Cardinal Kids Camp
Scholarship Program Application

Please type or print nearly, then parents/guardians should return the completed form to the Office of Recreation Services.
*Household’s most recent W2 and previous year tax copies must accompany this form.

Child’s Name: ____________________________
Age: ______ Date of Birth: ______/_____/_______ Gender: M  F
Grade (as of Fall 2017): ___________ Home Telephone Number: ______________________________
School: ___________________________ School District: _______________________________
Home Address: __________________________________________________ Zip: __________
Has the child attended CKC before? Y  N If yes, how many years has he/she attended? ______
Parent’s Employer (if applicable, will remain confidential): ______________________________
Parent’s E-mail Address (will remain confidential): ______________________________________

Does your child currently receive free or reduced lunch at their school? Y  N

<table>
<thead>
<tr>
<th>List all household members</th>
<th>Monthly income from ALL sources</th>
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<tbody>
<tr>
<td>First and last name</td>
<td>Earning from work before dedications</td>
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X ____________________________
Signature            Date

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<tbody>
<tr>
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<td>With Sibling</td>
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<td>AIA (Adolescents in Action)</td>
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<td>Half Day (7:15am-12:30pm)</td>
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<td>Half Day (12:30pm-4:15pm)</td>
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<td>Early Extended (6:30am-7:15am)</td>
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<tr>
<td>Late Extended (4:15pm-5:30pm)</td>
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