



Girl Talk's "Project Inside Out" Camp Scholarship Application

Camper Information

Name: _____ Age/Grade: _____

Address: _____

Phone Number: _____ Email: _____

How did you hear about our Project Inside Out? _____

Which Session (please check one):

___ June 7th-11th ___ June 28th-July 2nd ___ July 26th-30th ___ No Preference

How much, if any, of the camp fee is attendee/guardian able to provide? \$ _____

*We encourage campers to ask family, friends & local businesses to sponsor their camp experience.

Parent/Guardian Information

Parent/Guardian Name: _____

Phone Number: _____ Email: _____

Place of Employment: _____

Part Time Full Time Job Title: _____

Does your family participate in the following programs? (Please check all that apply)

Free/Reduced lunch Food Stamps Foster Program Other: _____

Please explain why this child is a candidate for financial assistance:

Guardian- Please Read & Sign:

I understand that I am responsible for arranging daily transportation for my child. I will sign her in/out every day and will make every effort to have her on time. You will be notified within three weeks whether or not your daughter will be receiving a scholarship. If she is awarded a scholarship, but cannot attend camp, please call (404.442.5605) or email Erin Patterson (Erin@desiretoinspire.org) no later than May 1st so we can offer the scholarship to another deserving girl.

Signature: _____ Date: _____

Adult reference (teacher, mentor, coach, counselor or social worker) please complete the following:

Name: _____ School/Organization: _____

Phone Number: _____ Email: _____

Address: _____

How long and in what capacity have you known this student? _____



Please rank the applicant on the following criteria (some areas will show significant improvement after camp):

	Average	Above Average	Excellent
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Why do you believe the applicant should receive a scholarship to Girl Talk's Project Inside Out?

Signature: _____ Date: _____

Please mail, fax or email this completed form to

Girl Talk Inc.
3060 Peachtree Road Suite 2000
Atlanta, GA 30305
Fax: (404) 442-5651
erin@desiretoinspire.org

Thank you so much for taking the time to apply for a camp scholarship. To learn more about Girl Talk or Project Inside Out, please visit www.desiretoinspire.org and click "Girl Talk Camps".

