



2026 Application for Indian Rock Camp Scholarship

Scholarships are available on a limited basis. Applications are due by March 1st. Applications received after March 1st will be accepted based on camp space availability. Some shared costs will apply, depending on your level of financial need.

Parent/Guardian Name(s) _____ Date _____

Address _____

Phone _____ Email _____

Child's Name _____ Grade Entering _____

Have you ever received a scholarship to attend Indian Rock Summer Camp? __ Yes __ No

If yes, how many years have you received a camp scholarship? _____

In the child's own words, have them write why they would like to attend Indian Rock Summer Camp. Use a minimum of three complete sentences.

Personal Statement of Need: Please explain your financial need and what you hope your child will gain from attending Indian Rock Summer Camp.

Please check the category below that best describes your household annual gross income including all income, child support, assistance programs, food stamps, etc.

_____ below \$20,000 _____ \$20,000-\$30,000 _____ \$30,000-\$40,000
_____ above \$40,000

Do you qualify for any of the following programs?

- ☐ SNAP (Supplemental Nutrition Assistance Program)
- ☐ Section 8 housing
- ☐ Husky A/Medicaid coverage
- ☐ Other financial hardship not defined above (please explain) _____

Please submit a copy of your proof of eligibility as listed above, as well as a current paystub(s), proof of unemployment coverage, or other proof of household income.

After attending Indian Rock Summer Camp, all financial assistance recipients are required to share a reflection of their experience in the form of a letter suitable to be shared with active or potential donors who make our camp scholarship funding possible. Letter content will be kept anonymous if requested. Please discuss this with your child and have them sign/agree here:

Child's Signature: _____ Date: _____

I verify that the above information is true and correct to the best of my knowledge.

Parent/Guardian Signature: _____ Date: _____

We appreciate your interest in Indian Rock Summer Camp, and we hope you will be able to join us this summer!

Environmental Learning Centers of Connecticut, Inc
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860-583-1234
summercamp@elcct.org
www.ELCCT.org

FOR STAFF USE ONLY

Date Application Received ____ / ____ / ____ Amount Awarded \$ _____ for ____ # of weeks

Funding Source _____