## **Lancaster Science Factory – Summer/Winter Camp Scholarship Application**

Thank you for your interest in Camps at the Lancaster Science Factory. This application may be completed electronically or by hand. Please complete it fully to be considered. Students may qualify for a scholarship that covers up to 2 camps. If selected for a scholarship, a staff member of the Lancaster Science Factory will contact you with further details.

Child's Name:	Age:
Street Address:	City: State: Zip:
Primary Contact Name:	Phone:
Email:	
Annual Household Income (select one)	
\$0 - \$20,000 \$20,001 - \$40,000 \$40,0001 -	\$60,000 \$60,001 - \$80,000 \$80,001 +
Number of people in household: (total of all adults	and children)
Part 1: Professional recommendation.	
Ex. Teacher, Guidance Counselor, Social Worker, Coach, Tuto	or, Clergy Member. Attach additional pages if needed.
Name: Job Title and Organ	nization:

Recommender Signature:	
Part 2: Written Request (by the child when possible)	
What interests you about science, technology, eng about in camp at the Science Factory?	ineering, art, or math? What is something you might like to learn
Part 3: Statement:	
	ation is true and correct. I am applying for financial assistance to ertify that I am financially unable to pay the regular fees.
Parent/Guardian Printed Name:	Signature:
Date:	
Preference of camps and/or dates:	

Please submit your completed application to:

Lancaster Science Factory Attn: Scholarships 454 New Holland Ave. Lancaster, PA 17602

Email: abakay@tlsf.org

Program spaces cannot be reserved without completing this form.

Scholarships are granted on a first-come, first-served basis.