

# Camp Alleghany Alumni Association The Lantern Scholarship

## Part I: Parent Questionnaire and Financial Aid Application

Parents of campers applying for the Lantern Scholarship should complete Part I and submit it along with Part II, the Camper Questionnaire. *All information supplied on this form will be kept strictly confidential.*

Camper's Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Parents' Email: \_\_\_\_\_  
Campers' Birth Date: \_\_\_\_\_ Age on June 1, 2016: \_\_\_\_\_ Grade for current year (2015-2016): \_\_\_\_\_  
Parent #1(Guardian #1's) Name : \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_  
Parent #2 (Guardian #2) Name : \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_  
Camper resides with: Parents Mother Father Other: \_\_\_\_\_  
Siblings Living at Home: Brothers' Names/Ages \_\_\_\_\_  
Sisters' Names/Ages \_\_\_\_\_  
Others Living at Home: Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_  
Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_  
Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Father's Monthly Net Income \_\_\_\_\_  
Mother's Monthly Net Income \_\_\_\_\_  
Any Additional Sources of Income \_\_\_\_\_  
**TOTAL MONTHLY NET INCOME** \_\_\_\_\_

Please write a paragraph detailing your family's financial ability to pay tuition. Include details such as children in college, recent large medical bills, job changes, or other significant issues related to income or expenses. Please also include any possible financial *support* from family members not living at home. Feel free to use an additional sheet of paper if necessary.

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What is the amount you feel your family can afford to pay? \$ \_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

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Why is it important to you that your daughter attends Camp Alleghany?

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*Send Completed Application to:*

Scholarship@alleghanyalumni.com

OR

**Camp Alleghany Alumni Association**  
**Attn: Scholarship Committee**  
PO Box 8404  
Richmond, VA 23226

Office Use Only: Date Rec _____ Date Resp _____
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# Camp Alleghany Alumni Association The Lantern Scholarship

## Part II: Applicant Questionnaire

Campers applying for the Lantern Scholarship should complete Part II.

Name: \_\_\_\_\_

Current Grade in School: \_\_\_\_\_

How many years have you attended Camp Alleghany: \_\_\_\_\_

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All applicants please answer the following questions. You may attach an extra sheet of paper if necessary. Please fill out both the front and the back.

1. Why do you want to attend Camp Alleghany?
2. How did you hear about Camp Alleghany?
3. What are your hobbies and favorite things to do?
4. When you have time to be by yourself, what do you enjoy doing?
5. Who in your life would you like to thank for doing something kind for you? What did this person do, and why was it so important to you?
6. Have you ever been away from home longer than one week? If yes, describe the experience. If not, how do you feel about it?

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**Prospective Junior Campers (currently in grades 4-6) please answer the following questions:**

Describe a special moment you have shared with a good friend or your family. Why is it special to you?

What do you dream to be when you grow up?

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**Prospective Senior Campers (currently in grades 7-10) please answer the following questions:**

Describe an experience you have had that you feel has influenced who you have become as a person. Explain the importance of this experience to you.

If you were to volunteer your time to help others, what would you choose to do and why?