



CLINTON PARKS & RECREATION DEPARTMENT  
201 KILLINGWORTH TURNPIKE CLINTON, CONNECTICUT 06413  
Phone: 860-669-6901 Fax: 860-664-4073 Email: [rpotter@clintonct.org](mailto:rpotter@clintonct.org)

# Scholarship Application

<b>Parent/Guardian Name:</b>		
<b>Current Address:</b>		
<b>Cell Phone:</b>		
<b>Email Address:</b>		
<b>Child's Name:</b>		
<b>Child's Date of Birth:</b>		
<b>Grade:</b>	<b>Age:</b>	<b>School:</b>
<b>Name of Camp:</b>		
<b>Household Gross Monthly Income:</b> <i>Please attach proof of your household's most recent 30 days income with your application (all sources, including unemployment, self-employment earnings, child support, social security benefits, etc.)</i>		
<b>Any special financial circumstances we should be aware of?</b> <i>(Medical bills, foreclosures, etc.)</i>		
<b>Amount you can contribute:</b>		
<b>Have you received financial assistances from Clinton Parks and Recreation before?</b>		

Please understand that your application will be reviewed by the P&R Director and the Assistant to P&R Director and you will be notified when a decision has been made.

By signing below I agree that the information submitted is true and accurate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date