



Application for Scholarship for Summer Camp

Application Date: _____

Your Name: _____

Address: _____

City, State, ZIP: _____

Email: _____

Phone: _____

Child's Name: _____

Child's Age: _____

For which GAI camp(s) are you requesting scholarship?

Camp start date(s):

Do you have financial dependents as reported to the IRS?
YES NO

If so, how many? _____

Summer Camp Scholarships cover 50% of the camp and
aftercare costs.

Please use an additional sheet to answer the following
questions and attach to application form.

1. *Why are you interested in enrolling your child in a German camp?*
2. *What current financial factors qualify your child for a need-based scholarship? Please explain any circumstances to help clarify your current financial status.*
3. *Is there additional information that would help us better understand why your child would be a good candidate for a language study scholarship? Please explain.*

Candidates will be notified of scholarship award decisions as soon as possible following receipt and review of the application

Please return completed form to:
Germanic-American Institute
Attn. Language Services
301 Summit Avenue
Saint Paul, MN 55102

Office: 651-222-2979
Fax: 651-222-6295
E-mail: language@gai-mn.org