33 Clearpool Road
Carmel, NY 10512
845.225.8226
greenchimneys.org/camps/

The Friends of Green Chimneys Summer Camp 2027 Scholarship Application

The Friends of Green Chimneys seeks grants from foundations and individual donors so we can provide scholarships to families that otherwise would not be able to send their children to camp. Scholarships are awarded based on the family's need and the availability of funds. Parents/guardians will be responsible for any additional tuition not covered by the scholarship.

For Summer 2027 applicants may receive a scholarship award of either 25%, 50%, or 75% of their total camp tuition.

Traditionally, recipients of our summer camp scholarships are at or below 250% of the federal poverty level.

The Green Chimneys Scholarship Committee will review applications beginning on **February 15th**. Applications submitted after this date will be reviewed on **March 15th**, provided funding has not been exhausted. **Any applications received after March 15th** will only be considered if funding still remains after our first two rounds of review.

Funds are limited and it is essential that scholarship families adhere to the guidelines outlined below so that all families in need have the opportunity to receive a scholarship.

Instructions: (please read carefully to make sure your application can be processed)

1. **Please complete a 2027 Summer Camp Registration online by going to www.greenchimneys.org/camps/ and pay the minimum deposit.** Your deposit will be refunded if a scholarship is not awarded and you can't afford camp. You may call AJ Johnson at 845-225-8226 x1600 to arrange a payment plan for the deposit. ***Please be sure to register before submitting your scholarship application. Your application cannot be processed unless you have registered your camper(s) for camp.***

2. Complete the scholarship application form.

3. Include a full copy of your:
   - **2026 W2 Form and any additional documentation (child support documentation, food stamp, court orders etc.)** as income verification with this application.
   - **2025 Income Tax 1040 Form** ** Please note: in order to apply for a scholarship for your child, they have to be declared as your dependent on your 1040 form. **

   The Scholarship Committee will not finalize any application without your 2026 W-2 and 2025 1040 forms.

4. Return the scholarship form to: Green Chimneys, 33 Clearpool Road, Carmel, NY 10512, Attn: AJ Johnson/Scholarship Application or via email to ajohnson@greenchimneys.org.

5. If you receive a scholarship, we must receive payment for the balance of your child's tuition or have an approved payment plan on file no later than **May 1st**. If we do not receive payment information by that date, we will unfortunately have to cancel your child's scholarship award.

PLEASE PRINT CLEARLY

Parent Name_____Employer_____Tel_____

Parent Name_____Employer_____Tel_____

Street address:_____City_____State_____Zip:_____

Home phone_____Email_____Cell_____

School District Children Attend: _____

Family Status (please circle one): Married Single Parent Foster Guardian Other_____

Camper's Name:_____Male ☐ Female ☐ Age_____Grade Sept '27_____

Camper's Name:_____Male ☐ Female ☐ Age_____Grade Sept '27_____

Camper's Name:_____Male ☐ Female ☐ Age_____Grade Sept '27_____

If your child has current Food Stamp or TANF Case Number and you can present documentation of this, please list here:

_____

If you are eligible for child care services through the Department of Social Services, please list your case number here:

_____

Will you be applying for any other grants or receiving funding from other sources? Please explain expected assistance.

_____

_____

_____

YOU MUST REGISTER FOR CAMP BEFORE APPLYING FOR SCHOLARSHIP.

Camp and Session Selection:

1. Select the camp you would like your child to attend.
2. Select which sessions and how many children for each.

Friends of Green Chimneys awards scholarships to help send as many children to summer camp as possible. Therefore, scholarships will **not** be awarded for weeks or sessions that a child cannot attend camp (i.e. vacation). Session requests MUST only be made for weeks your child can attend.

Please select camp (circle one): Hillside (Brewster) Clearpool (Carmel)

How Many Campers?

Day Camp: 3-Week Sessions

Session I: June 28 - July 16 _____
Session II July 19 - August 6 _____
Session III: August 9 - August 27 _____

Day Camp: 1-Week Sessions

Week 1: June 28 - July 2 _____
Week 2: July 5 - 9 _____
Week 3: July 12 – 16 _____
Week 4: July 19 - 23 _____
Week 5: July 26 – 30 _____
Week 6: August 2 - 6 _____
Week 7: August 9 – 13 _____
Week 8: August 16 – 20 _____
Week 9: August 23 – 27 _____

CIT Program: 8-Week Session

June 28 - August 20 _____

One to One Counselor Support Yes No

Early Care (7:30am-8:30am) Yes No
Late Care (5:00pm-6:00pm) Yes No

FINANCIAL INFORMATION

List All People in Household	Wages	**Public Assistance:** TANF, Food Stamps, S.S	**Other Support:** Child Support, Pensions
1.			
2.			
3.			
4.			
5.			
6.			

TOTAL IN HOUSEHOLD:_____ TOTAL MONTHLY INCOME:_____

COMMENTS

In order to help us evaluate your application, please explain your child's need for a scholarship (explain home/family situation, extenuating circumstances and child's needs) & submit a reference from a teacher, coach, clergy etc. to help explain how camp would benefit your child. Please attach a separate page if needed.

By accepting a scholarship, the parent agrees and confirms:

- **All information submitted is accurate including all financials (tax returns, child support, etc).**
- **To provide all payment information no later than May 1st.**
- **To have child attend camp for all sessions scholarships were awarded for.**
- **To complete and return a camp evaluation form at the end of the session.**
- **Future scholarship applications will not be accepted unless these requirements have been completed.**

Initial here: _____

Parent/Guardian Signature *Date*