

**Watkins Summer Camp  
Scholarship Application 2018**



**General Information**

Student Full Name \_\_\_\_\_

Birth date \_\_\_\_\_ Age \_\_\_\_\_ Current Grade \_\_\_\_\_ Gender: M / F Ethnicity \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_

School Attending \_\_\_\_\_

School Address \_\_\_\_\_

Teacher Name \_\_\_\_\_

School Phone \_\_\_\_\_

If selected to receive a scholarship, which camp would you like to attend?

Class Title \_\_\_\_\_

Date of Class \_\_\_\_\_

**Number of Household Members**

List below the people in the parent's household.

Name	Age	Relationship to Student	If a student, where enrolled?	Part or full time?
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

\*\*Please include above: the student applying for a scholarship; his/her parent(s); siblings if the parents will provide more than half of their financial support from January 1, 2018 –December 31, 2019; other individuals if these people NOW live with the parents listed above and the parents provide more than half of their support and will continue to provide support through June 30, 2019. If you need more room, please attach a sheet to this form.

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**Verification of 2016 Income Information of Parent(s)**

The instructions and certifications below apply to each parent included in the household.

Check ONE that applies:

Both parents were not employed and had no income earned from work in 2016. (if un-taxed income such social security, child support, etc., documentation must be provided)

One or both parents were employed in 2016 and have listed below the names of all employers, the amount earned from each employer in 2016, and whether an IRS W-2 form is provided. (attach copies of all 2016 IRS W-2 forms issued by parents' employer).

Employer's Name	Annual Amount Earned in 2016	IRS W-2 or Untaxed Income Documents Provided?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*I understand that a condition of my child receiving an scholarship is my commitment to provide transportation for each class of the session. In addition, by signing below, I verify all in the information in the applicaiton is accurate.*

\_\_\_\_\_  
Parent/Guardian Signature Date

*Please mail this form, and all required documents, to:* Community Education  
Watkins College of Art  
2298 Rosa L. Parks Blvd  
Nashville, TN 37228

Note: All income documents (submitted for verification purposes) and artwork will be returned.