



**OGLEBAY INSTITUTE  
2008 JUNIOR NATURE CAMP  
SCHOLARSHIP APPLICATION**

*Please complete all relevant questions and return the completed application with your registration to the address listed below. Scholarships are based on need, merit and timeliness of application. Due to the number of scholarship requests received, funding for full scholarships is not always available. Awards may be partial.*

*Please complete a separate form for each scholarship applicant. You will be notified in writing regarding any award. A completed registration **MUST ACCOMPANY** this scholarship application.*

**APPLICATION DEADLINE: Friday, June 20, 2008**

**Applications postmarked after this date will not be considered.**

Name of applicant: \_\_\_\_\_ Age: \_\_\_\_\_

I would like to attend:      \_\_\_ Week One      July 20-26, 2008  
   \_\_\_ Week Two      July 27-August 2, 2008  
   \_\_\_ Both Weeks      July 20-August 2, 2008

What grade is the child entering for the 2008-2009 school year? \_\_\_\_\_

Has applicant attended any OI Camp before?     Yes     No

Has applicant received scholarship assistance before?     Yes     No

**For the camper:**

Briefly describe how attendance at this camp would be a benefit.

---

---

---

---

---

List any past and/or current experiences that would indicate an interest in the area for which a scholarship is being considered.

---

---

---

---

---

**For the parent/guardian:**

Please check one of the following ranges of *total* yearly family income:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Less than \$13,000  | <input type="checkbox"/> \$13,000 – \$18,000 | <input type="checkbox"/> \$18,000 - \$22,000 |
| <input type="checkbox"/> \$22,000 – \$27,000 | <input type="checkbox"/> \$27,000 – \$31,000 | <input type="checkbox"/> \$31,000 - \$36,000 |
| <input type="checkbox"/> \$36,000 – \$40,000 | <input type="checkbox"/> \$40,000 - \$45,000 | <input type="checkbox"/> More than \$45,000  |

Number of dependent children in your household: \_\_\_\_\_ Total household size: \_\_\_\_\_  
(Children & Adults)

Briefly describe how attendance at this camp would benefit your child.

---

---

---

Please list two references, indicate their relationship to you, and provide a telephone number for each.

---

---

Parent/Guardian's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Daytime Telephone #: \_\_\_\_\_

Evening Telephone #: \_\_\_\_\_

e-mail address: \_\_\_\_\_

Return this completed application with your camp registration form to:

**Oglebay Institute Scholarship Committee  
1330 National Road  
Wheeling, WV 26003**

Information provided on this application is considered strictly confidential by Oglebay Institute.