

Knox County 4-H Financial Aid Application

Questions about how to complete this form?

Mail completed form by May 1 , 2021

Call: 865-215-2340 Or email: sadavis@utk.edu

Camper Information	
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First and last name	Grade as of 1/1/21	Age
My camper has attended 4-H Camp before: My camper has received a scholarship to 4-H Camp before:	Yes O No O Yes O No O	
Parent/ Guardian Information		
First and last name	Phone	

Street Address

City	State	Zip

Email

Scholarship Eligibility

There are a limited number of scholarships available to participants who are in need of financial assistance. Should your participant be in need of a scholarship, the information below will help determine his/her eligibility. You will be notified if you have been granted or denied a scholarship.

Please mark all that apply:

- O I am sending more than one camper to camp.
- O My camper is eligible for the free and reduced lunch program at school.
- O I am a single parent/guardian.

Scholarship Options

There are only a limited number of scholarships available. We encourage families to contribute what they can towards their participant's fees. Please choose which option you are able to afford.

O I am requesting a full scholarship of \$315 and will not be able to	O I am
send my camper to 4-H Camp without one.	cont

O I am requesting a **partial** scholarship and can contribute the amount listed below Amount contributed:

Monthly Payment Option

In the event that my camper does not qualify for a scholarship,	I am able to pay	the fu	I camper fee of \$315 in monthly	
payments to be paid in full on or before May 1, 2021:	Yes O	No	0	

Statement of Income & Other Forms

Please provide the following documents related to your household finances:

- 1. Statement of 500 or less words specifically addressing financial constraints facing your family this year
- 2. If your family owns or operates an agricultural enterprise, please state that in your letter.

Agreement

I agree that the information provided on this form is up to date and corre	ct to the best of my knowledge. I understand that
by submitting this form, my participant is not guaranteed a scholarship.	
First and last name (please print)	Signature

Date	
24.0	