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Sea Turtle Camp Scholarship Application

All information provided will be held strictly confidential and will not be used for any other purpose.

All financial aid applications will be reviewed on a first come, first serve basis. Please note that we are only able to offer partial scholarships. Sea Turtle Camp awards four total scholarships: two for 25% and two for 50%. The programs for which aid is available include our 6 and 11-day Topsail Island based programs, with the exception of scuba camps.

In order to be considered, your completed application must be received in our office by February 1 and include the following:

- 1) Scholarship application form
- 2) Two teacher references
- 3) Copy of parent's/legal guardian's most recent 1040 form
- 4) Letter written by the student explaining why this would be a beneficial experience for them

Camper Information:

First Name: _____ Last Name: _____ Date: _____
Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Day Phone#:_(_____) _____ Email: _____

Which program are you interested in attending: Marine Bio Camp Marine Bio Immersion

DOB: ___/___/____ Age: ____ School Currently Enrolled In: _____

School's Mailing Address: _____

Current Grade Level: _____ Science Teacher(s): _____

Science courses taken: _____

Other Sports/Clubs/Activities you are involved with: _____

Conservation Projects you are involved with: _____

Do you get paid for part-time work? (Circle One) Yes No If so, how much per year? _____

Name of employer: _____ Type of work: _____

Are any siblings attending or have attended one of our programs? (Circle One) Yes No

If yes, list names of participants: _____

Camp Tuition:

Please keep in mind that our goal is to assist as many students as possible in obtaining a rewarding summer camp experience. We ask that all applicants ask only for the amount of aid that is truly needed. Camp tuition does not include airfare, so please factor in your travel expenses.

Percentage of the tuition you can afford: _____

Family Information:

Parents Marital Status: _____ Total number of family members in household: _____

Mother/Father Name:

First: _____ Last: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell #: _(_____) _____ Secondary Phone #: _(_____) _____

Name of Current Employer: _____

Number of years at current job: _____ Position: _____

Mother/Father Name:

First: _____ Last: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell #: _(_____) _____ Secondary Phone #: _(_____) _____

Name of Current Employer: _____

Number of years at current job: _____ Position: _____

Please Note: Regardless of the outcome of your financial aid request, this application must include your deposit if you wish to reserve a spot in camp. If you have not sent a deposit, we cannot guarantee that there will be space in your preferred session. *All deposits are non-refundable and are subject to the deposit refund policy as outlined on our website.* If you have previously received financial aid, please do not assume that aid will be offered again. Tuition balances are due by April 1st. A monthly payment plan can be established to help you meet this deadline. If you have any questions please call 910.686.4611 or e-mail coordinator@seaturtlecamp.com .

Parent Signature: _____ Date: _____

Please Print Name: _____

Camper Signature: _____ Date: _____

Please Print Name: _____