Dear Scholarship Applicant:

The intent of the Michael J. Levitt Summer Camp Scholarship Fund is to provide financial assistance to families that would not otherwise be able to afford the full cost of the IGFA Summer Camp program. This assistance is granted in the form of full tuition, contingent upon the availability of funds and camp space, for one week of the IGFA Summer Camp (excluding Advanced Angling weeks). Determination of eligibility for applicants is the decision of the International Game Fish Association staff. Incomplete forms or applications without the documentation required below will not be reviewed.

Parents must fill out the application completely and submit the following items along with your application.

**REQUIRED ITEMS:**
- Completed scholarship form
- Copy of a government issued ID (driver’s license, ID card, etc.)
- Copy of prior year’s tax return or statement of annual earnings
- Letter from child stating why he/she wants to attend our camp (handwritten are best)

**IF APPLICABLE:**
- Unemployment income statements
- Financial assistance documents such as Social Security, free or reduced lunch, etc.
- List any special circumstances such as medical conditions, death in the family, illness, job loss or any other situation(s) that may impair the family’s ability to pay*

All applications (with supporting documents) must be received by **May 22, 2020.**
Incomplete applications **will not be considered.**
It is your responsibility to contact us to confirm that your application was received.

Completed applications and documents listed above must be mailed to:

**IGFA**
**ATTN: Joanna Olczyk**
**300 Gulf Stream Way**
**Dania Beach, FL 33304**

Or emailed to: education@igfa.org

Successful applicants will be notified by **May 29, 2020.**

*Eligibility of special circumstances will be evaluated and determined on a case-by-case basis, taking all factors necessary into consideration.
**IGFA SUMMER FISHING CAMP SCHOLARSHIP FORM**

Parent or Guardian Name(s): ________________________________________________

Child’s Name: ____________________________________________________________ Age: ______

Mailing Address: __________________________________________________________________________________________________________________

City, State, Zip: _____________________________________________________________________________

Home Phone: (_________) ________________________ Cell Phone: (_________) _______________________

Email Address: _____________________________________________________________________________

Total Household Size: ____________________ Household Annual Gross Income: ______________________

Number of Dependents: ____________________

Camp Week to Attend (circle which week below):

<table>
<thead>
<tr>
<th>Week 1</th>
<th>Week 2</th>
<th>Week 3</th>
<th>Week 4</th>
<th>Week 5</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>From Fresh to Salt</em></td>
<td><em>All About the Bait</em></td>
<td><em>Fishing on the Fly</em></td>
<td><em>The Science to Fishing</em></td>
<td><em>Beyond the Beach</em></td>
</tr>
<tr>
<td>June 8-12</td>
<td>June 15-19</td>
<td>June 22-26</td>
<td>June 29 – July 2**</td>
<td>July 6-10</td>
</tr>
<tr>
<td><strong>Week 6</strong></td>
<td><strong>Week 7</strong></td>
<td><strong>Week 8</strong></td>
<td><strong>Week 9</strong></td>
<td><strong>Week 10</strong></td>
</tr>
<tr>
<td><em>Bigger, Better, Bass</em></td>
<td><em>That Behavior is Fishy</em></td>
<td><em>Which Fish is Which?</em></td>
<td><em>Under the Microscope</em></td>
<td><em>Sharks!</em></td>
</tr>
<tr>
<td>July 13-17</td>
<td>July 20-24</td>
<td>July 27-31</td>
<td>August 3-7</td>
<td>August 10-14</td>
</tr>
</tbody>
</table>

**There will be no camp on Friday, July 3rd**

1. Tell us what excites the applicant about coming to the IGFA Summer Camp.

2. Briefly explain your reasons for applying for this scholarship.

3. Are there any specific circumstances that we should be aware of in considering your request?

*I hereby swear, under penalty of perjury, that the above information, as well as the enclosed documents, is true and that by signing below, I am stating that my family has a true financial hardship that would prevent my child from attending camp without financial assistance:*

PRINT NAME: __________________________________________________ SIGNATURE______________________________

DATE: ____________________________________________________________________________________