

2019 4-H SPACE ADVENTURE CAMP
Student Financial Assistance Nomination

DEADLINE: MAY 3, 2019

Mail to: Travis West, Camp Director
16714 Wolf Run Road, Caldwell, OH 43724

Nominations are to be completed by the teacher for the students in his/her class. Students nominated for financial assistance will then be mailed an application for financial aid. Determination of financial assistance will be made once that application has been received.

NAME OF STUDENT _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (____) _____ AGE _____

1. Has this student attended Space Adventure Camp before? (check one)
Yes___ No ___

If no, did you provide the student a registration flier? Yes ___ No ___

2. Does the student show enthusiasm about Space Adventure Camp? (check one)
Yes___ No ___

3. How much financial assistance would the young person need? (check one)
\$25___ \$50___ \$75___ More_____

4. Explain why you think this young person deserves and should be selected to receive financial assistance for 4-H Space Adventure Camp.

Teacher's Signature _____ Phone (____) _____

School _____ Grade _____

This form may be duplicated as needed.



THE OHIO STATE UNIVERSITY

COLLEGE OF FOOD, AGRICULTURAL,
AND ENVIRONMENTAL SCIENCES



<http://spaceadventurecamp.cfaes.ohio-state.edu>

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