

Summer 2024

Dear Scholarship Applicant,

Thanks to generous gifts from donors such as Ranken Jordan Pediatric Bridge Hospital, Society for Information Management, the Nancy Galvin Education Scholarship Fund, the Kwame Family Foundation, and Joyce and Michael Bytnar, the Saint Louis Zoo is pleased to announce scholarship opportunities for our educational summer camp programs. These donors provide financial assistance for under-resourced students to attend one week of camp: Camp Joey, Camp KangaZoo, Teen Camp or Specialty Camp. Full scholarships are available for children who are interested in learning about the animal world, but could not otherwise attend our camp programs due to financial limitations.

Financial Aid Scholarships are available for our Camp programs (funding is available to provide lunch to scholarship recipients):

- Camp KangaZoo is four days and one evening (or mini-week is three days and one evening) for youth entering 2nd – 6th grade. Funding is available to provide aftercare to scholarship recipients.
- Teen Camp is a similar program for youth entering 7th 9th grade (four days and one overnight).
 Funding is available to provide aftercare to scholarship recipients.
- Specialty Camps (various topics) are four days for youth entering 3rd-12th grades. Funding is available to provide aftercare to scholarship recipients.
- Camp Joey is five days (or mini-week is four days) for youth at least 5 years through youth entering 1st.
 Aftercare is **not** available for Camp Joey.

Scholarships for all camps will be awarded based on interest and financial need as determined by an application and recommendation form.

To apply for a Camp Scholarship:

- 1. Apply online or complete the following Camp Scholarship Application:
 - a. Head of Household Information Form (1 per household 3 pages)
 - b. Child Information Form (1 for each child 4 pages). Your child's essay on page 4 is a very important part of the application, and will be used to help in selection, especially if applying to Teen Camp. Please share this with your child.
- 2. Ask a community leader to complete the <u>recommendation form</u>, and either email directly to <u>campoffice@stlzoo.org</u> or place it in a sealed envelope, sign it across the seal, and return it to you. Do not open the recommendation. This person could be a teacher, school principal, social service worker, religious leader, neighbor, or other adult <u>who knows your child **and** your financial situation</u>. Only one completed recommendation form for each child is required, however additional recommendations are welcome. *Recommendations from relatives will not be accepted*.
- 3. Send your completed application forms **and** the <u>sealed</u> recommendation form (unless it was sent to us directly) to the address on the application form. The application and recommendation form must be **received by April 15**.

If accepted for a full scholarship, you will receive a confirmation packet in the mail. If you have any questions contact the Education Department at (314) 646-4544, option #6.

Sincerely,

Bridget Ebert

Bridget Ebert Manager of Youth Programs



| | ompleted Application Form Idation Form by <u>April 15</u> to: | Camp Scholarship Application Saint Louis Zoo Education Department One Government Drive Saint Louis, MO 63110 | | | | | | | |
|---|---|---|----------------------------------|---------|-----------------|--------------------|-----------------|--|--|
| STEP H1: HI | EAD OF HOUSEHOLD INFOR | MATION | | | | | | | |
| Head or House or Guardian's | | | | | | | | | |
| Street Address | S: | | | | Check here if | new addres | SS | | |
| City: | | State: | | | Zip+4: | | | | |
| Phone Numbers: | Home: | Work: | | Cell: | | | | | |
| Email Address | S: | | | | | | | | |
| Your e-mail address may be used to send you information about your Saint Louis Zoo education program. Please check here \Box if you would also like to receive e-mail updates, news and information about other Zoo opportunities. We will not sell, trade, or exchange your e-mail address with any third parties. | | | | | | | | | |
| STEP H2: H | OUSEHOLD INFORMATION | | | | | | | | |
| Are you a sin | Are you a single parent/guardian? 🛛 yes 🗅 no | | | | | | | | |
| How many pe | eople are in your household (ir | ncluding yourself a | and any/all chi | ldren)? |) | | | | |
| Please Explain: | | | | | | | | | |
| List of Childre | en Applying For A Financial Ai | d Scholarship | | | | | | | |
| | t each child applying for a scholars a Child Information form for eac | | ı. | | | | | | |
| CHILD'S LEG | 'S LEGAL NAME BIRTH DATE | | | | ADE II 2024) | Office Us C-App | e Only R-Ltr | | |
| | | | | | | | | | |
| | | | | | | | | | |
| STEP H3: H | OW DID YOU LEARN OF THIS | S SCHOLARSHI | P OPPORTUN | IITY? | | | | | |
| Organizations: Dept. of Ch School Blueprint4S Bringing Fa East Saint Other organ | □ Su □ Zoo □ Zoo | end or family m | unities/camp fair r volunteer | | | | | | |



| STEP H4: FINANCIAL INFORMATION | | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| Please indicate your approximate family income per year: | What assistance do you or any members of your household receive? Please check all that apply: | | | | | | | |
| □ \$0-\$9,999 □ \$10,000-\$14,999 | My family does not receive any assistance. Assistance from religious organization (church, mosque, temple, etc.) | | | | | | | |
| \$15,000-\$19,999 \$20,000-\$24,999 \$25,000-\$29,999 \$30,000-\$34,999 \$35,000-\$39,999 \$40,000-\$44,999 \$45,000-\$49,999 \$50,000-\$54,999 \$55,000-\$59,999 \$60,000-\$64,999 \$65,000-\$69,999 \$70,000-\$74,999 \$75,000-\$79,999 \$80,000-\$84,999 \$85,000-\$89,999 \$85,000-\$89,999 \$90,000-\$149,999 \$100,000-\$149,999 \$150,000 or higher I prefer not to say, and will provide detailed information about | Assistance from religious organization (church, mosque, temple, etc.) Daycare assistance/Subsidized daycare/Head Start Disability benefits Earned Income Tax Credit (EITC) Energy assistance/Heating assistance Food stamps/EBT/Food bank/WIC/Meals on wheels Foster care/Adoption subsidy Free or reduced school lunch Housing assistance/Section 8/Rental assistance/Public housing Medicaid/Medicare/Prescription drug assistance/CHIP (Children's Health Insurance Program) Recreation Council voucher/Easter Seals Social Security TANF (Temporary Assistance for Needy Families) Tuition assistance (for child <u>and/or</u> parent/guardians) Unemployment benefits Veterans benefits Weatherization assistance | | | | | | | |
| my circumstances at the bottom of this page. | | | | | | | | |
| Are you financially able to send your | children to Camp without a scholarship? | | | | | | | |
| Please explain. Attach additional pa | ges if necessary. | | | | | | | |
| | | | | | | | | |



| | AND REQUIREMENTS | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|
| Scholarship recipients must b | • | | | | | | | | | |
| Attend each day and participate in Camp activities Attend the evening program (Camp KangaZoo only) Attend the camp behavior guidelines | | | | | | | | | | |
| Provide transportation for the second s | ne following times: | | | | | | | | | |
| Camp Joey (age 5 – entering 1 st) · | KangaCare not available | | | | | | | | | |
| FULL Day (M-Fr) Daily Drop-off 8:30 a.m. Daily Pick-up 3 p.m. | Mini Week (M,Tu,Th,F) – June 17 week Daily Drop-off 8:30 a.m. Daily Pick-up 3 p.m. | | | | | | | | | |
| Camp KangaZoo (entering 2 nd -6 th | grades) | | | | | | | | | |
| M-Th Daily Drop-off 8:30 a.m. | M-Th Daily Pick-up 3 p.m. | Th Evening – Drop-off 6 p.m. Th Pick-up at 10 p.m. | | | | | | | | |
| | OR if registered in <u>KangaCare PM Aftercare</u> - Pick-up between 4-6 p.m. (M-W) and No pick-up required on Th afternoon, children may stay until the evening program | | | | | | | | | |
| Camp KangaZoo June 17 Mini-We | eek (entering 2 nd -6 th grades) | | | | | | | | | |
| M,Tu,Th Daily Drop-off 8:30 a.m. | M,Tu,Th Daily Pick-up 3 p.m. | Th Evening – Drop-off 6 p.m. | | | | | | | | |
| | OR if registered in <u>KangaCare PM Aftercare</u> - Pick-up between 4-6 p.m. (M,Tu) and No pick-up required on Th afternoon, children may stay until the evening program | Th Pick-up at 10 p.m. | | | | | | | | |
| Teen Camp (entering 7 th -9 th grade | es) | | | | | | | | | |
| M-Th Daily Drop-off 8:30 a.m. | M-Th Daily Pick-up 3 p.m. | Th Overnight – Drop-off 6:30 p.m. | | | | | | | | |
| | OR if registered in <u>KangaCare PM Aftercare</u> - Pick-up between 4-6 p.m. (M-W) and No pick-up required on Th afternoon, children may stay until the overnight | Fri morning Pick-up at 8:30 a.m. | | | | | | | | |
| Specialty Camps (various topics/ | grades, see Step C9 for details) | | | | | | | | | |
| M-Th Daily Drop-off 9 a.m. | M-Th Daily Pick-up 3:30 p.m. | NO Evening Program | | | | | | | | |
| | OR if registered in <u>KangaCare PM Aftercare</u> - Pick-up between 4-6 p.m. | NO Overnight | | | | | | | | |
| Will you and your children be ab | le to meet the above requirements? U yes | 🖵 no | | | | | | | | |
| Please Explain. Attach additiona | l pages if necessary. | | | | | | | | | |



| CHILD INFORMATION FORM (Please complete a separate form for each child) | | | | | | | | | |
|--|---|------------------------------|---|-------------------|---------------------------------|----------------|------------------|--|--|
| STEP C1: CHILD'S INFORMATION – REQUIRED | | | | | | | | | |
| Legal First and Last Name: Relationship to the Head of Hous listed (grandson, daughter, son, | | Birth Date: | | | Grade Level (Fall 2024): | | | | |
| INCLUSION SERVICES – R | | IIRED | | | | | | | |
| We welcome all campers to Saint Louis request inclusion services or for more in | | | | | ipation support, v | when n | eeded. To | | |
| | onditions physical function ique learning | umstances tha • • • | Diagnosed o Utilization o Significant a | - | school | | | | |
| Please contact me prior to car | mp to discuss my | camper's | unique cir | cumstances | : 🗆 y | /es | 🛛 no | | |
| STEP C2: PARENT/LEGAL | GUARDIAN INFO | ORMATIO | N – REQI | JIRED | | | | | |
| Please enter the information for the indi (can list "same" if it is the same information | vidual who has <u>permane</u> tion as the Head of Hous | ent legal guard sehold). | ianship for th | e participant, as | it relates to healt | th and I | egal decisions | | |
| Parent or Legal Guardian's Name: | | | | | | | | | |
| Email address: | | | | Cell phone | : | | | | |
| For this participant, a pare | For this participant, a parent/legal guardian must sign the following Agreements and the Terms & Conditions | | | | | | | | |
| STEP C3: CAMPDOC PARE | ENT PORTAL AG | REEMEN | T – SIGN | ATURE REG | QUIRED | | | | |
| The Parent/Legal Guardian listed above will b health information, forms and trusted contacts Portal. A link will be sent three weeks prior to will be sent to the person listed as the Parent | s in the CampDoc Parent the Camp start date and | listed will b | nd the parent <u>be required</u> to amper info c portal. | o l | ↓ Parent/Legal | ↓ I Guardia | ↓ n Signature | | |
| STEP C4: MEDICATION AD | MINISTRATION | | GREEME | ENT – SIGN | ATURE REG | QUIR | ED | | |
| View the Saint Louis Zoo Medication Administration Policy on our website at https://stlzoo.org/medication-policy | If my child will be tal acknowledge I have outlined in the Medic | read and agre | e to the terr | ns | • | • | • | | |
| STEP C5: TERMS AND CO | NDITIONS - SIGN | | REQUIRE | D | Parent/Legal Guardian Signature | | | | |
| Claims Release I on behalf of myself and my fa Saint Louis Zoo program or activity. I have read a members are in compliance. I fully and uncondit and all claims for personal injury and/or property relinquish all rights for any and all injury and/or p Photos taken by the Saint Louis Zoo staff during relations purposes related to the Zoo. The following applies for In-Person Programs Zoo, every visitor/program participant is responsi supervision. In consideration of access to the Zo (a) agree to comply with Zoo policies and instruc (b) understand and agree that the novel coronavi is contagious and that it can spread to persons ir (c) agree that they assume responsibility for any claim, liability, or expense arising out of or related visit/program (d) that they waive and release all claims against relative to the foregoing matters and (e) that they agree that the Zoo is legally entitled Medical Consent In case of emergency, I unde emergency contact. In the event that neither I, n be taken to the nearest appropriate hospital for in Licensing Status The Saint Louis Zoo takes gr practices in environmental education, to be deve- camps are however, not a part of a school program | r family rs from any redgement to activities. ad for public Saint Louis under their s area, that it mage, loss Zoo s and agents he r my child to ed using best ors. These | ¥ | ¥ | ¥ | | | | | |
| secondary education. | | | | | Parent/Legal | l Guardia | n Signature | | |



| STEP C6: TO BE C | OMPLETED BY PARI | ENT/GUARDIAN – RE | QUIRED | | | | | |
|--|--|---|--|---|--|--|--|--|
| Has this child previou Saint Louis Zoo Carr | | • | eviously attended a KangaZoo, Teen, or | | | | | |
| | · · · | from attending our Ca | U N N | | | | | |
| | | | | | | | | |
| STEP C7: CHOOSE | YOUR SHIRT SIZE - | REQUIRED | | | | | | |
| Please select the pail Camp Joey shirts are only. | ticipant's shirt size. e available in youth sizes | Youth X-Small (2-4 Youth Small (6-8) Youth Medium (10-6) Youth Large (14-16) | 12) [5) [| Adult Small Adult Medium Adult Large Adult X-Large Adult XX-Large | | | | |
| STEP C8: CHOOSE YOUR LUNCH – RESPONSE REQUIRED Please note: for the safety of other campers, we have replaced peanut butter with sunflower butter. | | | | | | | | |
| We are able to offer lunch to scholarship participants on each day that the camp occurs. Lunch will be a sandwich, fruit, snack mix, and beverage. Please indicate your child's sandwich choice below or select "NO LUNCH" if you will be sending lunch from home . | | | | | | | | |
| MONDAY Cheese Sunflower Butter & Jelly Turkey Turkey & Cheese NO ZOO LUNCH, will bring from home | TUESDAY Cheese Sunflower Butter & Jelly Turkey Turkey & Cheese NO ZOO LUNCH, will bring from home | WEDNESDAY Cheese Sunflower Butter & Jelly Turkey Turkey NO ZOO LUNCH, will bring from home | THURSDAY Cheese Sunflower Butter & Jelly Turkey Turkey NO ZOO LUNCH, will bring from home | FRIDAY (Camp Joey only) Cheese Sunflower Butter & Jelly Turkey Turkey Turkey & Cheese NO ZOO LUNCH, will bring from home | | | | |



2024 Camp Scholarship Application Child Information Form

| STEP C9: INDICATE YOUR CHILD'S CAMP AVAILABILITY – REQUIRED | | | | | | | | | | | |
|---|---|---|--|--------------------------------|-------------|-------------|---------------------------------|--------|----------|------------|--------|
| Camp Joey Schedule | | | For students age 5 years through entering 1 st who can use the restroom independently FULL DAY M-Fr (8:30 a.m3 p.m.) MINI-WEEK Jun 17 Week only: M,Tu,Th,F (8:30 a.m3 p.m.) | | | | | | | | |
| Camp KangaZoo Schedule | | | For students entering 2 nd -6 th grades M-Th (8:30 a.m3 p.m.) and Th Evening (6-10 p.m.) MINI-WEEK Jun 17 Week only: M,Tu,Th (8:30 a.m3 p.m.) and Th Evening (6-10 p.m.) | | | | | | | | |
| Teen Camp Schedule | For students entering 7 th -9 th grades M-Th (8:30 a.m3:30 p.m.) and Th Overnight (6:30 p.mFr 8:30 a.m.) | | | | | | | | | | |
| Specialty Camp Sche | | (various topi M-Th (9 a.m | cs/grades) 3:30 p.m.) a | and NO Overn | ight/NO Eve | ning | | | | | |
| PLEASE | | a scholarship, applicant will only be registered for one Camp week. vill be notified in May of your application status. | | | | | | | | | |
| Indicate in order of preference: In the s | | | paces below, check ("X" or " \checkmark ") <u>all</u> weeks your child is available to attend OR number in order of nee (1 st , 2 nd , 3 rd , etc). If the child is unavailable, leave that week blank. | | | | | | | | |
| Week of | | Jun 3 | Jun 10 | Jun 17 | Jun 24 | Jul 8 | Jul 15 | Jul 22 | Jul 29 | Aug 5 | Aug 12 |
| Camp Joey Age 5 years – entering 1 st | | | | Joey Mini-Week | | | | | | | |
| Camp KangaZoo Entering 2 nd -6 th grades | | | | Mini-Week | | | | | | | |
| Teen Camp Entering 7 th -9 th grades | | | | | | | | | | | |
| Specialty Camps | | Jun 3 | Jun 10 | Jun 17 | Jun 24 | Jul 8 | Jul 15 | Jul 22 | Jul 29 | Aug 5 | Aug 12 |
| Powerful Predators* | | | | | | | | | | | |
| Amazing Animals Around the World Entering 4 th -5 th | | | | | | | | | | | |
| Junior Marine Biologist* | | | | | | | | | | | |
| Senior Marine Biologist* Entering 7 th -9 th Required: Previous attendance in Junior Marine Biologist | | | | | | | | | | | |
| Conservation Careers Entering 9-12 th | | | | | | | | | | | |
| * SCIENCE SAFETY C | | | | RE REC Marine B | | | | | | nps: | |
| View the Saint Louis Zoo Science | | My | child and I | have read, | understand | d and agree | e to | | • | ↓ ↓ | |
| Contract on our website at stlzo | abio Lou | le by the sa is Zoo Scie | afety guide ence Safety | lines outlin Contract. | ed in the S | aint | Parent/Legal Guardian Signature | | | | |
| INDICATE YOUR CHILD'S EXTENDED CARE NEEDS | | | | | | | | | | | |
| KangaCare PM Options Entering 2 nd -12 th grades NOT Available for Camp Joey | \$70 / Child to add this option if Camp KangaZoo – Care until 6 p.m. M-Th | | | | | | : 6:30 p.m. | | | | |
| For each week, indicate your Jun 3 need for KangaCare PM: | | Jun 3 | Jun 10 | Jun 17 M,Tu,Th Mini Week | Jun 24 | Jul 8 | Jul 15 | Jul 22 | Jul 29 | Aug 5 | Aug 12 |
| NEED this, my child can NOT attend Camp without this option | | | | | | | | | | | |
| WOULD LIKE this, however my child COULD attend Camp without this option | | | | | | | | | | | |
| DO NOT NEED this option | | | | | | | | | | | |



STEP C10: TO BE COMPLETED BY <u>CHILD</u> (with help from the parent/guardian if necessary).

Use the space below to tell us *in your own words* why you would like to attend our Camp program. You can write and/or print out and draw. Attach additional pages if necessary.