



## 2008 SUMMER EXPERIENCES SCHOLARSHIP PROGRAM

The Tauck Foundation is a private foundation committed to supporting quality out-of-school-time experiences for low-income middle and high school youth. As part of this goal, the foundation provides scholarship assistance to individual youth to attend summer programs geared to their individual interests. The foundation encourages applicants to seek a summer experience that will nurture their interests, skills, and aspirations, that will expand their horizons, and will expose them to new people, places, and ideas.

### Eligibility

- Applicants must live and attend school in Rochester, NY.
- Applicants must be entering the 7<sup>th</sup> through 12<sup>th</sup> grade the fall *after* their proposed summer experience.
- Applicants must qualify for free or reduced lunch at their school.
- There are no restrictions on the summer program's focus (i.e. academics, art, technology, recreation, etc.; day vs. residential; length of program), however the quality of program will be considered.

### Application Process

- Interested students should first research and identify a summer program of interest. They should submit an application to the summer program (if required) and/or confirm space availability before applying to the Tauck Foundation for scholarship assistance. A student does not need to be accepted to a program before *applying* to the Tauck Foundation, however awards will only be made once acceptance to the summer program is confirmed.
- Students should fill out Part I of this application and return it via U.S. mail to the Tauck Foundation at the address listed. **Applications must be postmarked by May 1, 2008.** Incomplete applications will not be accepted.
- Students should provide Part II of this application to an adult who knows them well from school or other organized activity. This adult should not be a relative of the applicant. This recommendation form must be signed and sent directly to the Tauck Foundation by the person who completes it **by May 1, 2008.**
- Applicants will be notified once their application is complete (Parts I and II received, and space in the program confirmed).
- We encourage students to **apply as early as possible.** All applicants will be notified of scholarship award decisions by June 5, 2008.

### Selection and Award Process

- Scholarship recipients will be chosen based on the eligibility requirements listed above, the student's demonstrated interest in and/or commitment to the summer program's focus area, and the overall strength and quality of the proposed summer program.
- The foundation recommends programs that focus on developing particular skills or knowledge, that are in-depth and sustained (half or full day programs that last a least 1 week and preferably longer), and that have sufficient, well-trained staff.
- Preference will be given to students willing to contribute toward the cost of the program.
- Awards may cover significant costs of program participation beyond tuition (equipment, travel, etc.)
- All scholarship awards will be paid directly to the summer program in the student's name.

### Further Information

- This application form may be downloaded from the Tauck Foundation website at [www.tauckfoundation.org](http://www.tauckfoundation.org).
- If you have a specific question about the application process that is not covered in this packet or on our website, you may contact Roni Goldberg, Tauck Foundation Administrator, at 1-866-828-2536 (toll-free).

**Due May 1, 2008**



**2008 SUMMER EXPERIENCES  
SCHOLARSHIP APPLICATION (PART I)**

**Instructions to the Applicant:** Please complete both sides of this application in full. Biographical and Summer Program information may be completed by a parent or guardian and may be typed or handwritten. The Applicant Questions must be completed by the student *in their own handwriting*. Please use a blue or black pen.

Completed applications should be submitted via U.S. mail and postmarked **by May 1, 2008** to the following address:

**The Tauck Foundation  
PO Box 5020  
Norwalk, CT 06856  
Attn: Summer Experiences Scholarship**

**A. BIOGRAPHICAL INFORMATION** - Please provide us with information about you and your family.

\_\_\_\_\_  
**Student's Name** **Date of Birth** **Male/Female**

\_\_\_\_\_  
**Street Address** **Social Security Number**

\_\_\_\_\_  
**City, State Zip** **Email Address**

\_\_\_\_\_  
**Name of Mother/Parent/Guardian**

\_\_\_\_\_  
**Name of Father/Parent/Guardian**

\_\_\_\_\_  
**Street Address**

\_\_\_\_\_  
**Street Address**

\_\_\_\_\_  
**City, State Zip**

\_\_\_\_\_  
**City, State Zip**

\_\_\_\_\_  
**Phone**

\_\_\_\_\_  
**Phone**

\_\_\_\_\_  
**Email**

\_\_\_\_\_  
**Email**

\_\_\_\_\_  
**Student's Current School** **Current Grade Level**

\_\_\_\_\_  
**Name of adult completing Part II of this application** **Relationship to applicant**

\_\_\_\_\_  
**Organization** **Phone Number**

**Optional - Demographic Information (If bi-racial or multi-racial, please check all that apply.)**

- |  |   |
|--|---|
| <input type="checkbox"/> Asian                     | <input type="checkbox"/> Pacific Islander     |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> White (non-Hispanic) |
| <input type="checkbox"/> Hispanic or Latino        | <input type="checkbox"/> Other _____          |

**B. PROGRAM INFORMATION** - Please provide us with information about the Summer Program for which you are applying for tuition assistance.

<b>Program Name</b>	<b>Program Dates</b>
<b>Name of Organization Offering Program (if different than program name)</b>	
<b>Address</b>	
<b>City, State Zip</b>	
<b>Phone Number</b>	<b>Program or Organization's Website Address</b>

If the above program requires an application, have you submitted one?  Y  N  Not Applicable

If an application is required, have you been accepted to the program?  Y  N

If not, when do you expect to hear? \_\_\_\_\_

Total cost/tuition to attend the program? \$ \_\_\_\_\_

Amount student and/or family is able to contribute? \$ \_\_\_\_\_

Amount requested from the Tauck Foundation? \$ \_\_\_\_\_

Have you applied for tuition assistance from other sources? If so, please describe. \_\_\_\_\_

**C. APPLICANT QUESTIONS** - Please answer the following questions on a separate piece of paper *in your own handwriting*. Please use only blue or black ink.

1. Tell us about any organized activities outside of school hours (sports, after-school programs, church groups, etc.) in which you have participated in the last two years. Please list the activity, the organization, and the dates (see example).

*Little League Baseball      Parks & Recreation Department      March 2005-June 2005*

2. Please describe what you did during Summer 2007.

3. Why did you choose the summer program for which you are applying for tuition assistance?

4. What do you expect to enjoy most about the program?

5. What do you expect will be most difficult or challenging for you?

\_\_\_\_\_  
**Signature of Student** \_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Parent/Guardian** \_\_\_\_\_  
**Date**



**Due May 1, 2008**

**2008 SUMMER EXPERIENCES  
SCHOLARSHIP APPLICATION (PART II)**

**Instructions to Student Applicant:** Please complete the Applicant Information section below and provide this form to an adult who knows you well from school or another organized activity.

**Instructions to Adult Completing this Form:** Please complete all the Reference Information below and answer the four questions on a separate piece of paper. Completed reference forms must be submitted directly to the Tauck Foundation *by the adult who completes the form*. Forms should be submitted via U.S. mail **by May 1, 2008** to the following address:

**The Tauck Foundation  
PO Box 5020  
Norwalk, CT 06856  
Attn: Summer Experiences Scholarship**

**A. APPLICANT INFORMATION**

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**Student's Name**

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**Student's Current School**

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**Current Grade Level**

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**Proposed Summer Program**

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**Program Dates**

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**Brief Description of Summer Program**

**B. REFERENCE INFORMATION**

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**Name of person completing this form**

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**Email**

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**School/Youth Organization**

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**Phone**

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**Address (City, State Zip)**

1. Please describe your relationship to the applicant and how long you have known him/her.
2. How would he/she benefit from participating in the proposed summer program?
3. Do you have any concerns regarding his/her participation in this program? If so, explain.
4. Is this applicant eligible for free or reduced lunch?  **Yes**  **No**  **Not Sure**  
Are there any additional financial or family circumstances that should be considered?

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**Signature**

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**Date**

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**Name**

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**Title**