



2020 Camp Canopy Scholarship Application

The Geauga Soil and Water Conservation District (SWCD) is pleased to offer scholarship funding for the **2020 Camp Canopy**, held **June 7-12th** at FFA Camp Muskingum in Carroll County. Sponsored by the Ohio Forestry Association, this weeklong residential camp for high school students explores many branches of forest ecology including silviculture, tree identification, wildlife and forestry management, and forest products. Applicants must be a current Geauga County resident and enrolled in high school at the time of camp. Students who have completed eighth grade through seniors graduating this year are welcome to apply. **Applications are due by 3:00 pm on Wednesday, April 1, 2020.** *Scholarship recipients may be asked by the Geauga SWCD Board of Supervisors to provide a short presentation and/or report with photos highlighting their camp experiences at one of the District's regular board meetings.*

Please email application to gprunty@geaugaswcd.com or mail or submit application in person to *Geauga Soil and Water Conservation District, P. O. Box 410, 14269 Claridon-Troy Rd., Burton, OH 44021*. Visit geaugaswcd.com or call 440-834-1122 ext. 2 if you have any questions about the scholarship. For more information about Camp Canopy in general, visit ohioforest.org.

<i>Name</i>			
<i>Address</i>			
<i>City</i>	<i>State</i>	<i>Zip</i>	<i>Email Address</i>
<i>Home Telephone Number</i>	<i>Cell Phone Number</i>		<i>Parent Name & Phone Number</i>
<i>School</i>		<i>Homeroom Teacher</i>	
<i>Age (as of January 2020)</i>	<i>Grade</i>	<i>Amount Requested (select one):</i> <input type="checkbox"/> FULL \$375 or <input type="checkbox"/> PARTIAL \$ _____ <i>(fill in amount)</i>	
<p>Please include one additional page explaining in detail why you would like to attend camp, what you hope to gain from the experience, and how it will benefit your future. This page must be typed, sufficient in length, and exhibit a professional appearance. Thank you for your interest!</p>			
<p><i>I certify that the information provided on this scholarship application is true. Any information that is false or misleading can result in the loss of the scholarship, if awarded. My signature grants Geauga SWCD permission to publicize my name as the recipient of the scholarship.</i></p>			
_____ <i>Signature of Applicant</i>		_____ <i>Date</i>	
_____ <i>Signature of Parent or Guardian</i>		_____ <i>Date</i>	