The Malachy J. Ryan & John P. Hendry Scholarship Application Form

Part 1: Applicant Inform Child's Name:								
Date of Birth:	_ Age:	_ Gende	r:	Male	Female			
Address:								
Day Phone:	Night	Phone: _			_ Cell:			
Email address:								
Part 2: Dance Information School Name:			T	eacher: _				
Years Dancing:	Years Comp	peting:		Is this ch	ild in hard s	hoe?		
Please circle if school is:	Comp	etitive	or	Non-Co	mpetitive			
Level for Feis:								
Part 3: Session Preferer Which camp are you inte		ircle)	New	York	California	3	Indiana	
Listed below are the sessions for camp: CA : Session 1 IN : Session 1								
NY: Session 1	Session 2		Ses	sion 3				

In the lines above, please choose which session you would like to attend. Write a 1 next to the session you would most like to attend. Number the others to show your second, third and fourth choices. We will do our best to accommodate your interests.

Part 4: Attendance and Adult Evaluation (your application cannot be processed without the following)

School History

Please enclose *official* documentation of your attendance record for both last school year and the current school year.

Adult Evaluation Forms

Have two Adults (not related to you) fill out the enclosed Adult Evaluation form and mail back with your application package. One of them must be completed by an educational teacher.

Part 5: Financial Information

- 1. How many dependants do you claim on your income tax record?
- 2. Please send proof of the items in column A by submitting the items in column B. In column C, print the total monthly expense for each item in column A. You should provide as much detail about your expenses as possible, as this will establish your level of need for assistance.

ONLY SEND COPIES OF RECEIPTS!

	A	B	С
	^		
1	Income	2 Pay stubs/direct deposit receipts from EACH working parent (most current)	\$
2	Housing Expenses	Most current rent receipt or cancelled check for rent or mortgage payment	\$
3	Utilities	Most current phone, gas, electric, water and sewer bills	\$
4	Childcare/Tuition	Current month's receipt on facility letterhead or cancelled check	\$
5	Transportation	Cancelled check for car payment and Insurance or automatic deduction receipt*	\$
6	Food	Approximate monthly expenses	\$
7	Medical Expenses	Approximate monthly expenses	\$
8	Other Necessities	Approximate monthly expenses	\$
9		Total monthly income (from column C, line 1 above)	\$
10		Total monthly expenses (total column C, lines 2-8)	\$
11		Subtract 9 from 10 and place this figure here	\$

^{*}If you do not have a car or use public transportation regularly, you may list your approximate monthly bus, car or train fare.

3. If there have been any drastic changes in your financial status that you would like to
explain, please do so on the lines below. (use separate sheet if need be)

Part 6: Short Answer Essays

Applicant should hand-write the essays in their own words. Answers will be judged according to age and grade level. Answers should be no more then 75 words and no less then 50. You may attach a separate sheet, if necessary.

1. Why would you like to attend Camp Rince Ceol this summer?
2. How did you become interested in learning Irish Dance?
3. What do you like most about Irish Dancing?
4. What are some of your best attributes that you can bring to Camp Rince Ceol?
5. Discuss some of your talents that you can share with Camp Rince Ceol?

6. I would be very happy if I received a scholars	hip to Camp Rince Ceol because
7. In your community, are you engaged in any ex	xtra-curricular activities?
Part 7: Statement of Honor My signature below confirms that all the information that no documents have been altered, forged or false.	• •
My signature below confirms that all the information	sified.
My signature below confirms that all the information that no documents have been altered, forged or fals	sified Date:
My signature below confirms that all the information that no documents have been altered, forged or fals Applicant's signature:	sified Date:
My signature below confirms that all the information that no documents have been altered, forged or fals Applicant's signature:	ified Date: Date:



Adult Evaluation Form for Camp Rince Ceol

Application Deadline: May 1st Please mail directly to Camp Rince Ceol

Campers Name:				
1. What are some of the applicant's distinguis	shing attributes?			
2. How does this applicant interact with peers	and adults?			
3. Why would you recommend this applicant Camp, Malachy J. Ryan & John P. Hendry So	for the Camp Rince Ceol, Irish Dance Summer cholarship?			
4. Please summarize your overall evaluation	of this applicant?			
Signature:	Date:			
Name (printed):	Title:			



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