



Academic Achievement Center

Academic Achievement Center 435 Lincoln St. Eugene, OR 97401

## Scholarship Application

Please return by mail or drop off at the AAC

AAC scholarship programs are designed as tuition assistance to allow those to attend our programs that would otherwise be unable to afford them. Scholarship funds are limited for each camp or service, and are first come first serve.

Applicant Name \_\_\_\_\_ Date \_\_\_\_\_  
Parent's Name \_\_\_\_\_ Occupation \_\_\_\_\_  
Spouse Name (If applicable) \_\_\_\_\_ Occupation \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone ( ) \_\_\_\_\_ Email \_\_\_\_\_  
AAC Program Name \_\_\_\_\_  
Program Cost \_\_\_\_\_ Program Date(s) \_\_\_\_\_

**Please check one:**

Scholarship Amount Requested 50% Discount on program \_\_\_\_\_  
Scholarship Amount Requested 25% Discount on program \_\_\_\_\_  
Annual Household Income \_\_\_\_\_ Size of Household \_\_\_\_\_ Number of children under age 18 \_\_\_\_\_

**Financial Need:** Please describe your financial situation and why you feel that you need this scholarship in order to be able to attend the program.

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How do you see this program enhancing your children's development?

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I affirm to the best of my knowledge that the above information is true and complete.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Deadlines: Scholarship requests must be received one week prior to the start of the selected program(s).