AL-BUSTAN SEEDS OF CULTURE SCHOLARSHIP APPLICATION - 2015



Please provide us with information to consider your child(ren) for camp scholarship.
Child(ren)'s Name
Grade(s) in Fall 2015
sirthdate(s)
Current School
lome Telephone
address
Parent/Guardian Name
Cell or Work Tel
Parent/Guardian Name
Cell or Work Tel
lumber of Children in Household
lousehold Income Per Year
Nonthly Rent or House Mortgage
Other Reasons for Scholarship Request:
he regular camp tuition fee is \$600, due by June 1 st .
We can offer scholarships based on financial need, and will attempt to meet eac pplicant's needs with our available scholarship funds. All applicants must read and sign the cholarship agreement on reverse side of this page, and submit their application by Ma 5^{th} , 2015.
lease indicate the amount of tuition per child that you can afford:
Both) Parent/Guardian Signature(s): Pate:
lease mail to: 526 South 46 th Street, Philadelphia, PA 19143, or call 267-303-0070 to fax
Tuition Approved (office use only)

AL-BUSTAN SEEDS OF CULTURE



SCHOLARSHIP AGREEMENT - 2015

Al-Bustan Intensive Arabic with Arts Program for Teens

Dates:

June 29- July 17, 2015

Location:

Friends Select School, located at 1651 Benjamin Franklin Parkway, Philadelphia, PA, 19103.

Schedule:

The summer program is from 9:00am to 3:00pm, with drop-off from 8:45-9:00am and pick-up 3:00-3:15pm. Children should arrive on time in order to gain the most from the camp activities and not disrupt the daily schedule. Parents must pick up on time or a late fee will be charged after 3:30pm. The late charge is \$5 for every five minutes past 3:30pm.

Attendance:

Students are expected to attend daily in order to gain the most from their scholarship, or else jeopardize having their scholarship revoked if more than two absences are unexcused over the three weeks.

Conduct:

Al-Bustan fosters a fun, nurturing, respectful, cooperative, and educational environment for all its participants. Students are expected to conduct themselves accordingly and as per the conditions noted in the "Summer Program Participants Agreement," or else jeopardize having their scholarship revoked.

I/We,agree to the above participant's expect Program for Teens 2015.	student(s), have read and stations for Al-Bustan Intensive Arabic with Arts
Child(ren)'s Signature(s):	
(Both) Parent/Guardian Signature(s):	
Date:	

Please mail to: Al-Bustan Seeds of Culture, 526 South 46th Street, Philadelphia, PA 19143.