



2020 WOLF RIDGE/MOHE SCHOLARSHIP APPLICATION

to be completed by the parent or guardian

Thank you for your interest in applying for a Minnesota Office of Higher Education Scholarship to provide financial support for participating in a summer camp at Wolf Ridge Environmental Learning Center. If you qualify, this program will provide each applicant up to \$1000 in financial support to attend one program. Please note that campers will be invoiced for any balance due if the camp costs more than \$1000. To qualify, you must be entering grades 4 - 12 in the upcoming fall, qualify for Free & Reduced Lunch, and if in grades 7 - 12 have a "C" average or above.

Scholarships are awarded on a first come, first serve basis. We advise you to get your application in early to be considered.

PART 1 - Camper Information

PART 2 - You have included a letter signed by a staff member at your child's school stating they qualify for the *Free & Reduced Lunch Program in the State of Minnesota*.

PART 3 - Please provide a letter signed by a staff member at your child's school or a copy of the report card stating they have achieved a "C" average or above in their classes if they are in grades 7 & above.

PART 4 - Parent/Guardian signature

Upon completion, please mail or scan & email the forms to

Wolf Ridge ELC
6282 Cranberry Road
Finland, MN 55603

luciana.ranelli@wolf-ridge.org

PART 1 - CAMPER INFORMATION must be completed by the parent or guardian of the camper

CAMPER INFORMATION	
Name _____	
Address _____ <small>Street Address</small>	

<small>City/State/Zip Code</small>	
Age (on arrival at camp) _____ Birthdate _____ <small>Month, Day, Year</small>	
Entering grade _____ Gender (please circle) Male / Female	
Parents/Guardians with legal custody _____	
Email Address of Parents/Guardians _____	
Phone _____	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile

SOCIAL SECURITY #	REQUIRED FOR APPROVAL FROM THE STATE OF MN, NO EXCEPTIONS
_____	_____

TRANSPORTATION	Please understand depending upon the cost of the program this may be above and beyond what the MOHE will provide for scholarship assistance.
Do you want transportation to/from Wolf Ridge? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location (please check one)	
<input type="checkbox"/> Minneapolis/St. Paul (95th Ave Park & Ride)	
<input type="checkbox"/> Duluth (Thompson Rest Area)	
Ways (If YES, please check one)	If one-way (please check direction)
<input type="checkbox"/> One-way	<input type="checkbox"/> To Wolf Ridge
<input type="checkbox"/> Two-way (round trip)	<input type="checkbox"/> Home from Wolf Ridge

SCHOOL INFORMATION	Students must attend school in and be residents of the state of Minnesota
Name of School _____	
City/State of School _____	
If in Grade 7 & above, please provide the GPA for the student (and be sure to send a copy of their grades/report card)	
Overall GPA _____ GPA in Science _____	

ETHNICITY/RACE	please check all that apply
<input type="checkbox"/> Black/Afro-Caribbean/African American	Any person having origins in any of the black racial groups of Africa
<input type="checkbox"/> Latino(a)/Hispanic American	A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin
<input type="checkbox"/> Asian/Asian American	A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam
<input type="checkbox"/> American Indian/Alaskan Native	A person having origins in any of the original peoples of North & South America (including Central America) and who maintains tribal affiliation or community attachment
<input type="checkbox"/> Non-Hispanic White/Euro-American	
<input type="checkbox"/> Prefer not to answer	

PROGRAM & DATES

The following programs are the **ONLY** programs the MOHE Scholarship program covers. If you do not see it listed below, it is **NOT** available for scholarship using the MOHE Scholarship program. While you may only receive **ONE (1)** MOHE Scholarship, if you are applying for more than 1 program or date please rank which one is your 1st choice, 2nd choice and 3rd choice. Please write the name of the program and dates you prefer on the lines below.

CHOICE #1 _____ CHOICE #2 _____ CHOICE #3 _____

ENTERING GRADES 4 - 5	
DISCOVERERS	June 21 - 27, 2020
	July 5 - 11, 2020
	July 12 - 18, 2020
	July 19 - 25, 2020
	July 26 - August 1, 2020
	August 2 - 8, 2020
	August 9 - 15, 2020
GREEN ENERGY CAMP	August 9 - 15, 2020
ECO-ARTISTS	July 19 - 25, 2020

ENTERING GRADES 8 - 9	
ADVENTURERS 1-WK	July 12 - 18, 2020
	July 19 - 25, 2020
	July 26 - August 1, 2020
	August 2 - 8, 2020
ADVENTURERS 2-WK BWCA CANOE	July 5 - 18, 2020
ADVENTURERS 2-WK ISLE ROYALE BACKPACK	July 12 - 25, 2020

ENTERING GRADES 6 - 7	
VOYAGEURS	June 21 - 27, 2020
	July 5 - 11, 2020
	July 12 - 18, 2020
	July 19 - 25, 2020
	July 26 - August 1, 2020
	August 2 - August 8, 2020
	August 9 - 15, 2020
VOYAGEUR 2-WK ULTIMATE SURVIVAL	July 12 - 25, 2020
ANGLING TO ARCHERY	July 5 - 11, 2020
	August 9 - 15, 2020
WILDLIFE CAMP	August 2 - 8, 2020

ENTERING GRADES 10 - 12	
CREDIT ACADEMY: FRESHWATER ECOLOGY	July 5 - 25, 2020
CREDIT ACADEMY: WILDERNESS ETHICS	July 26 - August 8, 2020
JR NATURALISTS 2-WK QUETICO CANOE	July 19 - August 1, 2020
JR. NATURALISTS 2-WK APOSTLE ISLANDS KAYAK	July 26 - August 8, 2020
ORNITHOLOGY FIELD CAMP - Beginning	July 12 - 18, 2020
ORNITHOLOGY FIELD CAMP - Advanced	July 5 - 11, 2020

PART 2 - FREE & REDUCED LUNCH PROGRAM

If you are applying for the Minnesota Office of Higher Education Scholarship program, please provide a letter signed by a staff member at your child's school stating they qualify for the *Free & Reduced Lunch Program in the State of Minnesota*.

_____ You have provided a letter stating they qualify for the Free & Reduced Lunch Program in the State of Minnesota
THIS IS REQUIRED FOR APPROVAL

PART 3 - GRADE POINT AVERAGE (GPA)

If you are applying for the Minnesota Office of Higher Education Scholarship program and are in grades 7 - 12, please provide a letter signed by a staff member at your child's school stating they have a "C" grade point average or above.

_____ You have provided a letter stating they have a "C" grade point average or above

PART 4 - PARENT/GUARDIAN SIGNATURE

I certify that all the information in this application is true and accurate to my knowledge. I understand that submission of this application does not guarantee a scholarship.

Signature of Parent/Guardian _____ Date _____

Please be sure to completely fill out the **ENTIRE** application, that **INCLUDES** your child's social security number. Incomplete applications will **NOT** be considered!

Applications can **ONLY** be mailed or scanned & securely emailed - **NO FAXES!**