

**Summer Camp Scholarship Program
Brought to you by: FEAT of Southern Nevada,
Sport Social & The Lovaas Center**

(In Loving Memory of Levi)



APPLICATION – Please print

Childs Name: _____ Age: _____ DOB: _____

Parent/guardian Name: _____ Email: _____

Parent/Guardian Phone #: _____ Parent Guardian Phone # _____

Is your child currently enrolled at Sport Social? If yes, which program _____

How many children on the Autism Spectrum reside in your home? _____

Does your child receive any other therapy (Speech / OT / ABA etc.) If so, please list providers and amount of hours received:

Would this scholarship mean the difference between attending and not attending Sport Social?
Y / N

In your own words, please tell us how this scholarship would benefit your child. How would this financial scholarship benefit your family? You can also use the back of this paper to explain.

Staff Initial _____ Date Received _____ Approved Y / N
Notes _____

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SCHOLARSHIP GUIDELINES

1. The Summer Camp Scholarship Program will provide funding (\$290) for one week of summer camp at Sport Social during the summer of 2021
2. Scholarships will be awarded to 11 participants
3. Summer camp schedule:
May 27th- 28th / June 1st – 4th / June 7th – 11th / June 14th – 18th / June 21st – 25th
June 28th – July 2nd / July 5th – 9th / July 12th – 16th / July 19th – 23rd / July 26th – 30th
August 2nd – 6th
4. All applicants must be on the Autism Spectrum
5. You must provide and attach proof of Autism to this application to be considered (front page of an IEP or Diagnosis letter from your child's physician)
6. All approved applicants must be evaluated by Sport Social Staff to ensure the child can be placed in a week-long summer camp program
7. Contact Sport Social at 702-485-5515 to arrange a summer camp evaluation
8. Scholarship funding (\$290 for one week) will not be awarded until the evaluation is completed
9. Children must be able to follow directions in a group setting
10. Children must be able to wear a mask, wash hands and allow a temperature check
11. If extreme aggression or self-injurious behaviors are present or known during the evaluation, the child will not be allowed in the week-long summer camp program. Instead, the \$290 scholarship can be used at Sport Social towards a one-month program with 1:1 instruction.
12. Failure to have your child evaluated within 21 days of receiving the scholarship will result in loss of scholarship
13. If awarded, a FEAT staff member will contact you via phone or email
14. If awarded, the \$290 week-long summer camp scholarship funding will be credited to your Sport Social account
15. Scholarship credit is non-transferable and cannot be redeemed for cash
16. FEAT, Sport Social and The Lovaas Center reserves the right to pull scholarship funding at any time, for any reason.

I agree to the scholarship guidelines:

Parent Name: _____ **Parent Signature** _____

Staff Initial _____ Date Received _____ Approved Y / N

Notes _____

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**PLEASE NUMBER THE WEEKS YOU PREFER TO ATTEND
SUMMER CAMP FROM 1-3**

May 27th- 28 _____

June 1st – 4 _____

June 7th – 11 _____

June 14th – 18 _____

June 21st – 25 _____

June 28th – July 2 _____

July 5th – 9 _____

July 12th – 16 _____

July 19th – 23 _____

July 26th – 30 _____

August 2nd – 6 _____

Staff Initial _____ Date Received _____ Approved Y / N

Notes _____