Maine ACE Camp offers a program available for young people who wish to apply for a scholarship of up to \$400.00 to assist them in attending the Bangor Maine ACE Camp and up to \$175.00 for attending the Portland Maine ACE Camp. The applicant must be both 13 to 19 years of age and be a Junior High School or Senior High School Student. Candidates may be from any state or any country.

Summer Camp Scholarship Guidelines:

- Applicants are evaluated without regard to race, religion, natural origin, sex or physical ability.
- Funding is limited and scholarships are not guaranteed to all applicants.
- Staff of Maine ACE Camp, Inc. and their children are not eligible for scholarship assistance.
- Scholarships may NOT always be awarded two years in a row.
- Incomplete applications will not be reviewed.
- Scholarships will be awarded based on need and merit.

Summer Camp Scholarship Recipient Requirements:
□ Submit completed application
□ Submit financial documentation (Front Page of US Form 1040) demonstrating need
□ Submit letter of intent demonstrating passion for aviation
□ Complete and submit follow-up report and/or letter after Summer Camp

Qualified applicants will be assessed on the following criteria:

A demonstrated strong interest in general aviation.

A proven self-starter, willing to earn his/her way.

Academic skills as demonstrated by scholastic record of at least a C-Participation and demonstrated contributions to their communities.

Funding for the awards comes solely from contributions, not from dues or any other Maine ACE Camp funds. You are encouraged to support the fund through a charitable contribution. If you wish to make a contribution it can be made directly on our web page www.maineacecamp.com or to a check made payable to Maine ACE Camp and mailed to Peter Marucci, 41 Kansas Road, Naples, ME 04055

MAINE ACE CAMP INC Scholarship Application

Please IIII out one 10	orm per child.	
Name of		
Child		Birth
date	<u>/</u>	_
Mailing Address		
State	ZIP	
Phone () Cell Phone	
Family Email		
Grade		School
Attending		
What are your Avia	tion interests or experience?	

How many children currently live in the household?	Please list their
ages:	
REQUIRED FAMILY INFORMATION	
Father's Name	
Address (if different)	
Place of	
Employment	
Mother's Name	
Address (if different)	
Place of	
Employment	
Name of Legal Guardian (if not living with mother/father)	

FINANCIAL INFORMATION

*Household includes all people (adults and children) living in the
household, related or not (grandparents, other relatives, friends, etc.).
Please indicate your total annual household income from all sources (including wages, interest
income, investments, alimony, child support, social
security, public assistance):
\Box Below \$10,000 \Box \$20,001-\$25,000 \Box \$35,001-\$40,000 \Box \$50,001 - \$55,000
$\ \ \square \ \$10,\!001-\$15,\!000 \ \ \square \ \$25,\!001-\$30,\!000 \ \ \square \ \$40,\!001-\$45,\!000 \ \ \square \ \$55,\!001-\$60,\!000$
$\ \ \square\ \$15,\!001\ -\ \$20,\!000\ \ \square\ \$30,\!001\ -\$35,\!000\ \ \square\ \$45,\!001\ -\$50,\!000\ \ \square\ \$65,\!001\ -\$70,\!000$
□ Over \$70,000
Are there any extenuating circumstances, permanent or temporary, that make financial assistance
necessary at this time?

Are other family members currently applying for assistance? \Box Yes \Box No

Has anyone in your fami	ly previously received financial assistance thr	ough our scholarship	
fund? □ Yes □ No			
If yes, when?	How much was received	How much was received?	
\$			
Amount you are request	ing:		
\$			
How much can you contr	ribute?		
\$			
Name:			
Address:			
E-mail:	Phone:		
City/Town:	State:		
Zip/Postal Code:	Age: Date of Birth:		
1. Last grade year compl	eted/Scholastic Achievement:		

MAIL TO:

Peter Marucci 41 Kansas Rd Naples, ME 04055 OR Email to: Samnik@roadrunner.com