



ELEVATING THE SPECTRUM  
FOR INDIVIDUALS WITH AUTISM

## Ascendigo Autism Services Scholarship Application Summer Adventure Camp 2018

Please fill out the attached forms and submit them with the required items by email or mail to the address below. **Application must be received two weeks prior to camp session.**

Maureen Muller, Director of Business  
Ascendigo Autism Services  
818 Industry Place  
Carbondale, CO 81623  
[scholarships@ascendigo.org](mailto:scholarships@ascendigo.org)  
970-927-3143

### Guidelines:

1. Applicants will be evaluated without regard to race, religion, natural origin, sex or physical ability.
2. Funding is limited and scholarships are not guaranteed for all applicants.
3. Incomplete applications will not be reviewed.
4. It is highly recommended that you register for your child's preferred session and core sport before applying for scholarships (space is limited). This will guarantee your child a spot. A 50% deposit is required.

### Requirements:

1. Complete and submit the signed application by the deadline.
2. Scholarship recipients must agree to complete a follow-up report after the camp is over.

### Scholarship Checklist:

- Register for preferred camp session and core sport.
- Complete and sign the application - **MANDATORY**
- Include copy of most recent federal tax return or equivalent - **MANDATORY**
- Include any additional documentation or reference letters to help the committee understand your financial situation.
- Submit signed application (via mail or email) by the deadline – **MANDATORY**

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## Ascendigo Autism Services Funding Information and Session Dates Summer Adventure Camp 2018

All Ascendigo Summer Adventure Camp sessions are provided below actual cost, subsidized by fundraising efforts.

### Pricing Information

| Session Type   | Total Cost | Subsidized by Ascendigo (\$) | Camper Cost |
|--|------------|------------------------------|-------------|
| <b>For Campers on the autism spectrum*</b>               |            |                              |             |
| <b>5-day Residential Camp</b> (5 nights)                 | \$5,000    | \$2,500                      | \$2,500     |
| <b>7-Day Residential Camp</b> (7 nights)                 | \$6,000    | \$3,000                      | \$3,000     |
| <b>Day Camp</b><br>(Sunday check-in, Mon-Fri activities) | \$3,000    | \$1,500                      | \$1,500     |
| <b>For NTSF (Neuro-Typical Siblings &amp; Friends)*</b>  |            |                              |             |
| <b>5-day Residential Camp</b> (5 nights)                 | \$4,000    | \$2,000                      | \$2,000     |
| <b>7-Day Residential Camp</b> (7 nights)                 | \$4,500    | \$2,250                      | \$2,250     |
| <b>Day Camp</b><br>(Sunday check-in, Mon-Fri activities) | \$3,000    | \$1,500                      | \$1,500     |

\*All registrations subject to the 2018 Summer Adventure Camp Agreement

### Sessions

| Session | Start Date (check-in Sunday 4pm) | 5-Day End Date (Friday 2pm) | 7-Day End Date (Sunday at 2pm) |
|---------|----------------------------------|-----------------------------|--------------------------------|
| 1       | June 17                          | June 22                     | June 24                        |
| 2       | June 24                          | June 29                     | July 1                         |
| 3       | July 1                           | July 6                      | July 8                         |
| 4       | July 8                           | July 13                     | July 15                        |
| 5       | July 15                          | July 20                     | July 22                        |
| 6       | July 22                          | July 27                     | July 29                        |
| 7       | July 29                          | August 3                    | August 5                       |
| 8       | August 5                         | August 10                   | Unavailable                    |

For more information about scholarships and additional funding resources, see next page.

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## Ascendigo Autism Services Scholarship Information Summer Adventure Camp 2018

### Scholarships Available:

- Ascendigo awards a *limited* amount of scholarship funding based on the family's:
  - 1) financial need
  - 2) efforts to obtain other sources of funding
  - 3) non-monetary contributions to our organization
- Total awards are based on funds available from the *Bill Rieger Scholarship Fund*, and typically do not exceed 50% of the camper cost.
- Scholarships may be awarded for a maximum of two weeks of residential camp.
- Awards are decided by an independent committee based solely on the information provided in the scholarship application.
- For an application, contact [scholarships@ascendigo.org](mailto:scholarships@ascendigo.org) or call 970-927-3143.

### Insurance and Medicaid:

Most private insurance carriers do not provide reimbursements for our programs. Ascendigo is a Program Approved Service Agency (PASA) and is in the process of accepting Medicaid payments for Summer Adventure Camp. Please call us for more information.

### Other Possible Funding Resources:

The scholarship committee looks favorably on those who have made efforts to obtain funding from other sources. Below are some possible sources for you to investigate. Ascendigo does not guarantee the availability or quality of any of these possible sources. We are happy to discuss options with you, but it is your responsibility to follow up and apply.

### Community Centered Boards (CCBs):

Some of these agencies raise funds other than Medicaid dollars which may be applied to summer camps. Check with your local CCB to see if this is the case. They would need to contact us to set up a contract.

### Other Sources to Explore:

<http://nationalautismassociation.org/family-support/programs/helping-hand/>

<http://www.act-today.org/act-today-grant-program.php>

<http://www.uhccf.org/apply/>

<http://www.daniellesfoundation.org/>

<http://themorganproject.org/resources/>

Local faith based organizations or community charitable organizations: Elks, Rotary, etc.

Do your own fundraiser: <https://www.gofundme.com/fundraising-ideas-for-individuals/>

Autism Society of Boulder: <http://www.autismboulder.org/asbc-grants>

Denver Mill Levy Program: <https://www.rmhumanservices.org/ml>

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**CONFIDENTIAL INFORMATION – MUST BE COMPLETED IN FULL**

Please print clearly and e-mail to [scholarships@ascendigo.org](mailto:scholarships@ascendigo.org) or drop off at Ascendigo Headquarters.

Participant Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name of additional sibling  
attending program, if any: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent/ Guardian/ Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Please list the camp session(s) your child is registered for or interested in attending: \_\_\_\_\_

Has the participant previously attended Ascendigo's Summer Adventure Camp (circle one)? [ ] Yes [ ] No

If yes, please list year(s): \_\_\_\_\_

Have you been granted financial aid from Ascendigo before? [ ] Yes [ ] No

If yes, when and how much? \_\_\_\_\_

Please indicate your household adjusted gross income (AGI) by putting a check in a box below (**Include a copy of your most current tax return**).

|   |   |  |
|---|---|--|
| <input type="checkbox"/> Less than \$25,000 | <input type="checkbox"/> \$25,000-\$44,999  | <input type="checkbox"/> \$45,000-\$64,999   |
| <input type="checkbox"/> \$65,000-\$89,999  | <input type="checkbox"/> \$90,000-\$119,999 | <input type="checkbox"/> More than \$120,000 |

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Please list any additional household contributions. If the applicant is financially supported in whole or in part by a non-household adult or agency, the contributions from these parties must be included. Examples include but are not limited to welfare, child support, alimony, pensions, retirement, trusts, social security, respite, private education funding, health insurance benefits, FIA, SSI, workman’s comp, unemployment benefits.

Source: \_\_\_\_\_ Annual Amount: \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

How many family members does the above income support? \_\_\_\_\_

Do you plan to use the Medicaid CES Waiver for this camp session?  Yes  No

Please calculate amount of aid needed:

- A. Cost of program session(s) \$ \_\_\_\_\_
- B. Amount of tuition family can pay (include other sources of funding) \$ \_\_\_\_\_
- C. **Total financial aid amount requested** (Subtract line B from line A) \$ \_\_\_\_\_

Explain below why you are requesting financial aid. Please include special circumstances, such as unemployment, unreimbursed medical expenses, and any other factors that will help us make a fair decision. Use additional pages if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that the above information is true and correct to the best of my knowledge. Ascendigo Autism Services may verify the information on this application by requesting official documentation. By signing below, I agree to submit the scholarship follow-up report no later than August 31, 2018.

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

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## Ascendigo Autism Services Scholarship Post-Camp Report Summer Adventure Camp 2018

Please fill out this form completely and submit it along with any additional items by email or mail to the address below by **August 31, 2018**. Failure to return this form will you from receiving financial assistance

Maureen Muller, Director of Business  
Ascendigo Autism Services  
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Carbondale, CO 81623  
[scholarships@ascendigo.org](mailto:scholarships@ascendigo.org)  
970-927-3143

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Which session(s) did you attend? \_\_\_\_\_

Which core sport did you participate in? \_\_\_\_\_

What was your favorite activity? \_\_\_\_\_

What was your favorite part of Summer Adventure Camp? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What new experiences did you have at Summer Adventure Camp? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Do you have any pictures you would be willing to share with us? If so, please attach them to this report.*

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