



Summer Programming. Year Round Impact.

www.BayAreaPathwaysAcademy.org

2018 BAPA Scholarship Application

- Scholarships are based on financial need and will be provided until scholarship funds are depleted.
- Scholarships may provide partial or full funding for up to 3 two-week BAPA sessions.
- Completed applications* will be reviewed after the deadline in the order that they are received.
- Priority will be given to applicants who have not been awarded scholarships previously.
- **Receipt of a scholarship award does not guarantee the student his or her first choice of classes.**
- You may provide payment to secure your registration; and should you be awarded a scholarship, a refund will be processed.

Applicant Name: _____ Birth date: _____

Address: _____ City/State/Zip: _____

Has Applicant or Applicant's sibling attended our summer camp before? YES ___ NO ___
If YES, Name _____ Year _____

Has Applicant been awarded one of our summer camp scholarships before? YES ___ NO ___
If YES, when _____

Father's Name: _____ Phone Number: _____ Email: _____

Mother's Name: _____ Phone Number: _____ Email: _____

Legal Guardian's Name: _____ Phone Number: _____ Email: _____

Parents' or Guardians' Total Monthly Income from:

Wages _____ Business income _____ Alimony support _____

Social security/disability benefits _____ Unemployment benefits _____

Other Government support _____ Gift/ other form of support _____

Pension _____

If not awarded a scholarship, would you like to complete the registration with a payment?
YES ___ (please return to smccd.edu/bapa to complete your registration). NO ___

I, as the parent or legal guardian of the above-named applicant, attest that the information I have provided is true, current and accurate. I authorize the San Mateo County Community College District's BAPA Program to use my financial statements to consider my child for a scholarship. **I understand that scholarship funds are limited and not all applicants who fall within the Family Income Ceiling will be awarded a scholarship. I have enclosed all requested documents with this application.**

Signature: _____ Date: _____

Printed Name: _____

Deadline: May 4, 2018

(Application must be submitted by mail only due to inclusion of sensitive information; no email/fax accepted.)

*Completed applications must include 2016 or 2017 federal tax return, letter and registration form (included in this app).
A federal tax return is not required for foster youth applicants. Incomplete applications will **not** be considered.



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2018 Scholarship Application

Steps to Complete Your Application

Please submit the following with this application:

1. Letter requesting assistance and describing how the applicant is from a household whose income falls within the Family Income Guidelines below.
2. Copy of your 2016 or 2017 federal tax return – IRS Form 1040 including all schedules. (Scholarship Applications will not be accepted without the tax return, with the exception of foster youth applicants).
3. A completed selection of BAPA classes for each period & session. Please see the form on the next page.
4. Signed Student Conduct Policy (see page 4) with both parent/guardian and student signatures.

Your application materials must demonstrate that the student is from a household whose income falls below the eligibility guidelines below:

| SCHEDULE OF INCOME CEILINGS | | |
|------------------------------------|----------------|---------------|
| Family Income Ceilings | | |
| Size of Family Unit | Monthly | Yearly |
| 2 | \$3,183 | \$38,191 |
| 3 | \$3,729 | \$44,743 |
| 4 | \$4,275 | \$51,295 |
| 5 | \$4,821 | \$57,847 |
| 6 | \$5,367 | \$64,399 |
| 7 | \$5,913 | \$70,951 |
| 8 | \$6,459 | \$77,503 |

Add \$546 (monthly) and \$6,552 (annually) for each additional family member.

Please return your completed application materials to:
 BAPA/Community, Continuing and Corporate Education
 San Mateo County Community College District
 1700 W. Hillsdale Blvd. Bldg. 1, Room 207
 San Mateo, CA 94402

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Course Registration for Scholarship Applicants

BAPA classes run Mon-Fri for 3 two-week sessions, with both full day and half day (AM or PM) options.

Steps for Selecting Sessions & Classes

1. Select (✓) your desired session(s): **Session 1:** 6/18 to 6/29, **Session 2:** 7/2 to 7/13, **Session 3:** 7/16 to 7/27.
2. For each two-week session you select, complete class choices in the appropriate chart below. For full day, fill in the boxes for periods 1-8. For half day, fill in the boxes for periods 1-4 (for AM) and 5-8 (for PM). Be sure to include your top 3 choices for each period in case your first or second choice is not available. Visit www.BayAreaPathwaysAcademy.org to view course schedules and course descriptions.
3. Read and sign the Student Conduct Policy on p.4. You must include parent/guardian & student signatures.

EXAMPLE REGISTRATION: Session 1 Choices.

| | AM CLASSES | | | | PM CLASSES | | | |
|------------------------|------------------|------------------|-------------------|-----------------------|--------------------|------------------|-------------------|---------------|
| | Period 1 | Period 2 | Period 3 | Period 4 | Period 5 | Period 6 | Period 7 | Period 8 |
| 1 st Choice | Growth Mindset | Math 6 | Website Coding II | Kickboxing | X-Fit | Public Speaking | English 6 | Acting Improv |
| 2 nd Choice | Spanish | Social Studies 6 | Intro to Voice | Yoga | Dance | Learn A Cappella | Sketching & Manga | Chess Club |
| 3 rd Choice | Creative Writing | Website Coding I | Pencils & Pastels | Counselor in Training | Stroke Instruction | Social Studies 6 | Intro to Voice | Sign Language |

Session 1 Choices

| | AM CLASSES | | | | PM CLASSES | | | |
|------------------------|------------|----------|----------|----------|------------|----------|----------|----------|
| | Period 1 | Period 2 | Period 3 | Period 4 | Period 5 | Period 6 | Period 7 | Period 8 |
| 1 st Choice | | | | | | | | |
| 2 nd Choice | | | | | | | | |
| 3 rd Choice | | | | | | | | |

Session 2 Choices

| | AM CLASSES | | | | PM CLASSES | | | |
|------------------------|------------|----------|----------|----------|------------|----------|----------|----------|
| | Period 1 | Period 2 | Period 3 | Period 4 | Period 5 | Period 6 | Period 7 | Period 8 |
| 1 st Choice | | | | | | | | |
| 2 nd Choice | | | | | | | | |
| 3 rd Choice | | | | | | | | |

Session 3 Choices

| | AM CLASSES | | | | PM CLASSES | | | |
|------------------------|------------|----------|----------|----------|------------|----------|----------|----------|
| | Period 1 | Period 2 | Period 3 | Period 4 | Period 5 | Period 6 | Period 7 | Period 8 |
| 1 st Choice | | | | | | | | |
| 2 nd Choice | | | | | | | | |
| 3 rd Choice | | | | | | | | |

Important Information Before You Complete This Application

- Emails with important BAPA information will be sent to the email address provided on page 1, so please be sure to provide the correct email address when registering. A separate scholarship application is required for each student.
- Lunch is 12:10 – 12:55 PM. Students may bring a lunch or purchase lunch from the dining hall for \$6 (except Fridays)
- BAPA reserves the right to change instructors or classes, if necessary. Classes may not be changed after registration.
- Carefully read and review the Student Conduct and Refund Policies below before completing your registration. **Completion of registration implies parental and student agreement with BAPA Student Conduct and Refund Policies.** Please be sure to discuss the conduct policies with each child you register.
- BAPA will place bulk orders for summer camp t-shirts. Each child will receive 2 shirts. Bulk order sizes will range from Youth Large to Adult Large. If your child needs a size below or above this range, please let us know by email at CommunityEd@smccd.edu after you have completed registration.

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STUDENT CONDUCT POLICY STUDENT CONDUCT POLICY

Proper student conduct is expected the entire time a student is on campus, from arrival to departure, including all class periods and breaks.

1. I will demonstrate courtesy and respect for all staff members, teachers and students, and will behave in a responsible manner.
2. I will attend my scheduled classes on time unless excused by my parents.
3. I will respect the property of others, including college property and facilities.
4. I will obey all campus and classroom rules, including NO eating, drinking, or gum chewing in classrooms or the use of inappropriate or foul language throughout the entire time I am on campus.
5. I will keep my hands and feet to myself and will not engage in any kind of fighting, threats, or insults.
6. If enrolled in a computer class, I will not download programs nor make any changes to any program or system files, other than those the teacher specifies.

Students who are disruptive will be given the opportunity to correct their behavior before they are removed from the program. Extreme circumstances may require the Site Director to remove a student without warning.

1st time - Student receives a verbal warning.

2nd time - Site Director calls child's parent/guardian to discuss disruptive behavior.

3rd time - Site Director calls child's parent/guardian to pick child up immediately. There will be no refund (if applicable). The child will be removed permanently and will not be able to return.

I and my child (We) have read and agreed to follow the Student Conduct Policy. We understand that suspension or expulsion may occur if a student willfully or persistently violates any of these rules. We further understand that there will be no refund if a student is expelled from the program. Student may not be allowed to attend future programs.

By registering for a Community, Continuing & Corporate Education (CCCE) BAPA Program, I agree to indemnify the San Mateo County Community College District, its officers, employees and agents, from any and all liabilities which may arise as the result of my child's (or child I am registering) participation in the above activities. I also consent to the use of my child's (or child I am registering) pictures and video for CCCE publicity.

Please indicate your agreement with the Student Conduct Policy by signing below. Both signatures must be included for this form to be considered complete.

_____/____/2018
Parent Signature Month/Day/Year

_____/____/2018
Child Signature Month/Day/Year

Note: BAPA reserves the right to amend any of its rules and policies and further reserves the right to refuse a student's registration.

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