SUMMER @ AUSTIN PUBLIC
SCHOLARSHIP APPLICATION

OVERVIEW & INSTRUCTIONS
Each year the Austin Film Society offers summer filmmaking workshops for local students. Camps are organized around themes and age levels to provide a fun and engaging educational experience.

Please complete the application below if you would like to be considered for a scholarship to attend the Austin Film Society’s summer camps, which will be held at Austin Public. Scholarships include the cost of the camp only. Scholarships will be awarded based on both merit and availability of space at the summer camps.

Deadline: Applications emailed to yolanda@austinfilm.org no later than May 21, 2020.

SUMMER CAMP INFORMATION
All camps are: Monday – Friday, 9:00am – 5:00pm
**with the exception of AP Young Producers which is Monday – Friday 10:00am-6:00pm

Location: Austin Public (1143 Northwestern Ave, Austin TX 78702)

Place a check mark next to the camp(s) you would like to attend if selected for a scholarship.

<table>
<thead>
<tr>
<th>✓</th>
<th>Camp Name</th>
<th>Age of Participant</th>
<th>Dates of Camp</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Animation Creation Session I</td>
<td>9 – 11 years old</td>
<td>June 8 – 12, 2020</td>
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<tr>
<td></td>
<td>Express Yourself – Girls' Camp</td>
<td>12 – 15 years old</td>
<td>June 15 – 19, 2020</td>
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<td></td>
<td>Heroes &amp; Spies</td>
<td>12 - 15 years old</td>
<td>June 22 – 26, 2020</td>
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<td>Teen Filmmaker</td>
<td>14 - 17 years old</td>
<td>July 6 – 10, 2020</td>
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<td></td>
<td>Sci-Fi</td>
<td>12 – 15 years old</td>
<td>July 13 – 17, 2020</td>
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<td></td>
<td>Action Adventure</td>
<td>9 – 11 years old</td>
<td>July 20 – 24, 2020</td>
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<tr>
<td></td>
<td>Animation Creation Session II</td>
<td>12 – 15 years old</td>
<td>July 27 – 31, 2020</td>
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<tr>
<td></td>
<td>AP Young Producers</td>
<td>15 – 17 years old</td>
<td>August 3 – 7, 2020</td>
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</tbody>
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STUDENT INFORMATION

Student’s Name: __________________________ Age: _______ Birth Date: ___/___/____

Current School & Grade Level: __________________________________________________________

Parent/Guardian’s Printed Name: __________________________________________________________

Daytime Phone: (______) ___________________ Evening Phone: (______) ___________________

Mailing Address: _______________________________________________________________ Zip Code: __________

Parent Email: ___________________________ Student Email: ___________________________

ELIGIBILITY
Is your child eligible for free or reduced lunch? YES NO
To complete this application, please submit one of the following documents to determine eligibility for the Summer @ Austin Public scholarship award:

- Medicaid Notice of Case Action Letter from Texas Department of Health & Human Services
- Supplemental Nutrition Assistance Program (SNAP) Notice of Case Action Letter from Texas Department of Health & Human Services (also known as Food Stamps)
- Children’s Health Insurance Program (CHIP) Confirmation Enrollment Letter from Texas Department of Health & Human Services
- Telephone Lifeline Program Enrollment Letter or Phone Bill Reflecting Lifeline Enrollment
- Travis County Comprehensive Energy Assistance Program (CEAP) Notice of Payment Letter
- Medical Access Program (MAP) Clinic Card
- Supplemental Security Income (SSI) Award Letter
- Copy of most recent income tax returns (please be sure to remove all social security numbers)

**STUDENT ESSAY**

Why would you like to attend the Austin Film Society’s summer camps?

__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________

What is your favorite part of filmmaking?

__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________

What would you like to be when you grow up?

__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________

What other activities and hobbies do you have?

__________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________

**RELEASE & MEDICAL INFORMATION**

A parent or guardian should complete this section. If student is selected for a scholarship, this information will be used as the release form. If he or she is not selected, this information will be discarded.

In case of an emergency, please list two (2) people (with their telephone numbers) the Austin Film Society can call:

__________________________________________________________________________________________________________________

Would your son or daughter require any medical or special care while engaging in camp activities?

Yes_____ No____ If yes, please specify: ______________________________________________________

__________________________________________________________________________________________________________________

Does your son or daughter have any allergies or reactions to any medications or foods?

Yes_____ No____ If yes, please specify: ______________________________________________________

__________________________________________________________________________________________________________________

Is your son or daughter taking any medications that they would need to take during camp?
SUMMER CAMP RULES AND POLICIES

Code of Conduct

• In the spirit of collaboration, participants are expected to maintain a good attitude and show respect for others, including their instructors at all times during camps.

• If an Austin Film Society staff member deems that a participant has deliberately misused or damaged equipment, or is otherwise uncooperative and disruptive to his or her fellow students, they can be asked to withdraw from the camp and potentially not be permitted to register for future programs.

• If a participant is asked to leave the program due to inappropriate behavior or other circumstances deemed necessary by the Austin Film Society, no refund will be given.

PHOTOGRAPHY / VIDEOGRAPHY / CABLECASTING:

• Photos, videos and student films of the Austin Film Society’s activities are used for publicity and promotion to support the Austin Film Society programming and Austin Film Society’s Sponsors. Austin Public has the right to air student films on our cable channels and stream them online at our discretion. Anyone who does not want to be photographed, filmed, or appear on Austin Public’s cable channels or website should submit a written statement prior to participation.

Release of Liability

I have read and understand the above Summer @ Austin Public Rules and Policies.

Additionally, in consideration of my son or daughter being allowed to participate in the program, the undersigned hereby releases the Austin Film Society, its employees and agents, from any action, claim or demand for personal injury or property loss arising from or due to any negligent act or omission of the Austin Film Society, its agents or employees.

Parent or Guardian of Scholarship Applicant:

Signature: ____________________________ Date: _____/_____/

Print Name: ____________________________

Question? Please call us at (512) 478-8600 or email us at yolanda@austinfilm.org.