



Boys & Girls Club of Mount Vernon, New York, Inc.

Summer Scholarship Application 2026

Summer Program Scholarship Overview

The Boys & Girls Club Summer Scholarship Program helps ensure all children have the opportunity to participate in a safe, enriching, and fun summer experience—regardless of their financial circumstances. Our program offers a variety of engaging, skill-building activities where children can learn, grow, and create lasting memories.

Program Details

- **Purpose:** To make the BGC Summer Program accessible to families demonstrating financial need.
- **Eligibility:** Scholarships are awarded based on financial need. Supporting documentation is required.
- **How to Apply:**
 - Complete both the **Summer Program Registration** and **Summer Scholarship Application**.
 - Submit **one set of financial documents** per family.
 - Submit **one scholarship application per child**.
- **Scholarship Duration:** Awards are provided by weekly session and must be re-applied for each session period.
- For a full list of activities offered, refer to the **Summer Program Registration Application**.

Summer Scholarship Application

Please complete one application per child.

1. Parent/Guardian Full Name (Last, First):

2. Email Address:

3. Phone Number:

4. Child's Full Name (First, Last):

5. Are there other adults (18+) in the household?



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6. Total number of people in the household:

7. Number of children under 18 in the household:

8. Does your child live in a single-parent household?

☐ Yes ☐ No

9. Does your child qualify for free or reduced lunch?

☐ Yes ☐ No

10. Is anyone in the household disabled?

☐ Yes ☐ No If yes, please specify: _____

11. Is your family a military family not living on base?

☐ Yes ☐ No

12. Are you currently receiving financial aid or scholarships from other sources?

☐ Yes ☐ No If yes, please specify: _____

Session Selection

Please check all the weeks your child will attend:

☐ **Week 1:** July 6 – July 10

☐ **Week 2:** July 13 – July 17

☐ **Week 3:** July 20 – July 24

☐ **Week 4:** July 27 – July 31

☐ **Week 5:** August 3 – August 7

☐ **Week 6:** August 10 – August 14

☐ **Week 7:** August 17 – August 21

Financial Assistance Verification

13. Are you receiving assistance from other sources (e.g., other scholarships or programs)?

☐ Yes – Amount: \$ _____ ☐ No

14. DSS/TANF Budget Assistance:

☐ Yes – Amount: \$ _____ ☐ No



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15. Income Verification:

Please attach your W's or **four most recent** pay stubs or income statements. All financial information will be kept confidential and used solely to determine scholarship eligibility.

16. Are you currently experiencing homelessness?

☐ Yes ☐ No

17. Who does the child live with? (e.g., Mom – Jalissa Vanter):

Signature of Parent/Guardian: _____ Date: _____



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Parent & Caregiver Survey

Purpose: Your feedback helps us improve our services and better support you and your child(ren). This survey is **confidential**, takes less than 10 minutes, and your responses will **not** be linked to your application. **PLEASE DO NOT LEAVE BLANK. This form must be completed as part of the scholarship application process.**

Club Information

1. **Please select your Boys & Girls Club location:**

- ☐ [List of Clubs – dropdown or checkboxes as applicable]
☐ I don't see/know my Club's name

2. **If not listed, please write the name of your Boys & Girls Club:**

3. **How many children in your care currently attend the Club?**

- ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 or more

Depending on your answer above, please answer the following questions about:

☐ Your **oldest** child at the Club, or

☐ Your **youngest** child at the Club

General Information About Your Child

4. **What grade is your child in?**

- ☐ K–2nd ☐ 3rd–5th ☐ 6th–8th ☐ 9th–12th ☐ Other: _____

5. **How long has your child attended the Club?**

- ☐ Less than 1 year ☐ 1–2 years ☐ 3–5 years ☐ 6+ years

6. **How often does your child attend the Club during the Summer?**

- ☐ Less than once a month ☐ 1–3 times/month ☐ Once/week
☐ Twice/week ☐ 3+ times/week

Caregiver Experience

7. **How often are the following true for you?**

(Scale: Never / Sometimes / Most of the time / All of the time)

- I feel welcome at the Club.
- The Club feels organized when I walk in.
- There is someone I can talk to about my child.

All documents must be approved, and approvals are based on need bases.



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- I feel informed about Club activities and programs.
 - I have positive interactions with Club staff.
8. **What are the top 3 things you value or look forward to most about our program?**
(Select up to 3)
- ☐ Affordable cost
 - ☐ Safe environment
 - ☐ Fun experiences
 - ☐ Caring mentors
 - ☐ Academic help
 - ☐ Sports and fitness
 - ☐ Creative arts
 - ☐ Leadership development
 - ☐ Convenient hours
 - ☐ Other: _____
9. **How true are the following for you?**
(Scale: Not at all true / Not very true / True / Very true)
- The Club benefits me as a caregiver.
 - The Club plays an important role in my family's life.
 - I can count on the Club if I need support.
10. **In the past year, have you turned to the Club for support?**
☐ Yes ☐ No
11. **[If Yes] How would you rate the support received?**
☐ Poor ☐ Fair ☐ Good ☐ Excellent
12. **How likely are you to recommend the Boys & Girls Club to another family?**
(1 = Not at all likely, 10 = Extremely likely)
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

Open-Ended Questions

13. **What do you value or look forward to most about the Club?**

14. **How can the Club better support you?**



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Child's Club Experience

15. Please answer the following based on your child's experience:

(Scale: Not at all true / Not very true / Sort of true / Very true / I don't know)

- My child feels safe at the Club.
- My child feels like they belong.
- My child enjoys attending.
- My child has a trusted adult at the Club.
- My child feels accepted by peers at the Club.

Club Impact on Your Child

16. To what extent has the Club positively impacted your child's:

(Scale: Not at all / A little / Somewhat / A lot / I don't know)

- Behavior and attitude
- Social skills
- Emotional regulation
- Confidence
- School effort
- Grades
- Physical activity

17. The Club is preparing my child for the future.

☐ Not at all true ☐ Not very true ☐ Sort of true ☐ Very true

Child Needs & Barriers

18. What types of programs are most important for your child's development?

(Select as many as you like)

- | | | | |
|--|---------------------------------------|--|-------------------------------------|
| ☐ Sports & Recreation | ☐ Literacy | ☐ STEM | ☐ Leadership |
| ☐ Homework Help | ☐ Arts | ☐ Social-Emotional Skills | |
| ☐ Workforce Readiness | ☐ Other: _____ | | |



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19. What concerns do you have about your child's development?

(Select up to 3)

- | | | |
|--|---|--|
| ☐ Academic performance | ☐ Behavior | ☐ Confidence |
| ☐ Bullying/Exclusion | ☐ Peer relationships | ☐ Mental health |
| ☐ Physical health ☐ Other: _____ | | |
| ☐ I have no concerns | | |

20. How can the Club better support your child?

21. [If attendance is less than 3x per week] Why doesn't your child attend more often?

- ☐ Transportation issues
☐ Club hours don't fit the schedule
☐ Doesn't enjoy the Club
☐ Peer or adult conflict
☐ Other responsibilities (job, home care)
☐ Other: _____
-

Demographics

22. Race/Ethnicity (Select all that apply):

- | | |
|--|--|
| ☐ American Indian or Alaska Native | ☐ Asian |
| ☐ Black or African American | ☐ Hispanic/Latino |
| ☐ Native Hawaiian or Pacific Islander | ☐ White |
| ☐ Middle Eastern or North African | ☐ Other: _____ |

23. Did you attend a Boys & Girls Club as a child?

- ☐ Yes ☐ No

24. Home ZIP Code:

Stay Connected

25. Would you like to get involved in the Club as a parent liaison?

- ☐ Yes ☐ No

26. [If Yes] Please provide your email and phone so we can follow up: