



ZooCamp Scholarship Application 2025

Complete all pages of this form for *each child* you are requesting a scholarship for. All information must be complete and accurate. Forms can be completed digitally (see QR code), scanned and emailed, or printed and mailed. Please attach proof of income to this document upon completion.

Franklin Park Zoo Applications can be submitted the following ways:

- Completion of the Digital Form:
<https://forms.office.com/r/cnNqS2ziP>
- Email: FPZcamp@zoonewengland.org
- Mail:

Franklin Park Zoo
Attn: Education Department
1 Franklin Park Road
Boston, MA 02121

Please contact us via email
(FPZcamp@zoonewengland.org) with any questions.

Stone Zoo Applications can be submitted the following ways:

- Completion of the Digital Form:
<https://forms.office.com/r/cnNqS2ziP>
- Email: SZcamp@zoonewengland.org
- Mail:

Stone Zoo
Attn: Education Department
149 Pond Street
Stoneham, MA 02180

Please contact us via email
(SZcamp@zoonewengland.org) with any questions.

Camper's Name: _____

Which Zoo would you like your child to attend ZooCamp at?: _____

Date of Birth: ____/____/____ Grade Level Completed in June 2025: _____

Has your child attended ZooCamp Before? Yes No Are you a Zoo Member? Yes No

Membership Number: _____ Exp. Date: ____/____/____

Parent/Guardian's Name: _____

Phone Number: _____ Email Address: _____

Additional Phone or Email: _____

Address: _____ Apt: _____ City: _____ Zip: _____



ZooCamp Scholarship Application 2025

Are you applying for any additional ZooCamp Scholarships for the 2025 Season: Yes No

If yes, please list their name(s) and age(s):

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

ZooCamp Sessions for 2025:

Please select which sessions of camp you would be interested in having your camper attend for the 2025 camp season if you are offered scholarship funds. *Please note that not every session of camp is available to all age groups.*

2025 Themes include:

- Art (Session 1, 4, 7)
- Tails and Tales (Session 2, 5, 8)
- STEM (Session 3, 6, 9)
- Jr. Zookeepers (Sessions 7-9)
- Zoo Explorers (Session 10)

Session 1 (Age 6-10): June 16 – June 20 (No Camp, 6/19) *Stone Zoo Only*

Session 2 (Age 6-10): June 23 – June 27

Session 3 (Age 6-10): June 30 – July 3 (No Camp, 7/4)

Session 4 (Age 6-10): July 7– July 11

Session 5 (Age 6-10): July 14 – July 18

Session 6 (Age 6-10): July 21 – July 25

Session 7 (Age 6-7, 11-14): July 28 – August 1

Session 8 (Age 8-10, 11-14): August 4 – August 8

Session 9 (Age 8-10, 11-14): August 11 - August 15

Session 10 (4-5 Year olds): August 18 – 22*

*Please note, session 10 is a half day camp running from 9am – 12pm. No Extended care is offered for this age group.



ZooCamp Scholarship Application 2025

Household Income Information

What is your combined/total annual household income?: _____

Please select all additional forms of income and/or financial support your family receives:

- | | |
|---|--|
| <input type="checkbox"/> Child Support | <input type="checkbox"/> SNAP |
| <input type="checkbox"/> EBT | <input type="checkbox"/> Social Security |
| <input type="checkbox"/> Foster or Kinship Care | <input type="checkbox"/> Spousal Support |
| <input type="checkbox"/> Income from Second/Additional Job(s) | <input type="checkbox"/> WIC Nutrition Program |
| <input type="checkbox"/> Income Restricted Housing | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> MassHealth | |

Number of people in your household, including adults: _____

If you are not selected for a Full Scholarship (100% of tuition), could you accept a Partial Scholarship (50% of Tuition)? Yes No Maybe

How would your camper benefit from the ZooCamp experience v. another program type or activity?

Is there any additional information that you would like us to know?



ZooCamp Scholarship Application 2025

Please Note: Financial assistance is not guaranteed. Financial assistance will be awarded in line with Zoo New England's ZooCamp Scholarship Selection Policy. The information provided on this form will be kept confidential and will not be distributed.

Please attach proof of income to this document. Accepted forms include tax returns, pay subs, employment verification letters, or bank statements. Please be sure to omit any sensitive information, including social security numbers.

I certify that all of the information on this application is true & complete.

Applicant Name: _____

Applicant Signature: _____ Date: ____/____/____