



APPLICATION

DEEP USA
Phone: 518.962.2275 Fax: 518.962.8768
P.O. Box 205
Westport, NY 12993

DEEP CANADA
Phone: 416.975.9229
110 Cumberland St. Suite 234
Toronto, ON M5R 3V5

DUE DATE: APRIL 30
Applications are reviewed when all elements have been received.

SECTION 1: APPLICANT

CONTACT INFORMATION

Name _____ Age _____ Birth date _____ - _____ - _____
Last First Preferred mo. day yr.

Address _____ City _____ State/Prov _____ Zip/Postal _____

Country _____ Phone (_____) _____ Fax (_____) _____ Email _____

School _____ Grade Entering _____

How did you hear about DEEP? _____

Mother's Name (Guardian) _____
If different than above:
 Address _____
 City _____ State/Prov _____
 Zip/Postal _____ Phone _____
 Email _____
 Occupation _____ Employer _____
 Number of dependent children _____

Father's Name _____
If different than above:
 Address _____
 City _____ State/Prov _____
 Zip/Postal _____ Phone _____
 Email _____
 Occupation _____ Employer _____
 Number of dependant children _____

PROFILE

DEEP chooses applicants on the basis of both financial need and merit. Please answer the following questions to give us more information about you. Attach no more than two sheets with the answers to the following questions:

- ❖ Briefly describe why you would like to attend a wilderness education program and what you hope to gain from the experience.
- ❖ Please tell us about any activities you are involved in at school or in your community.
- ❖ Please describe any leadership experience you have.
- ❖ Describe how the opportunities provided by your DEEP scholarship will help you contribute to your community.
- ❖ What do you as an individual bring that will contribute to and enhance the program you attend?

*** **In addition to this application** you will need to submit a recommendation from an adult in your community who will be willing to meet with you before and after you attend the program. This recommendation can be submitted electronically through our website www.deepwaterproject.org or by sending our recommendation form and a letter directly to our office.

SIGNATURE

I declare the information provided to be accurate to the best of my knowledge. I give DEEP permission to use pictures of me or quotations from me to advance the organization's mission.

Date

Signature of Applicant

SECTION 2: PARENTS

Applicant Name: _____

Parent(s) Name(s): _____

FINANCIAL INFORMATION & ESTIMATE OF NEED

- **US APPLICANTS:** You must include a copy of your most recent 1040 as well as the financial information below.
- **CANADIAN APPLICANTS:** You must include a copy of your T3 as well as the financial information below.
- If the applicant is a ward of the state, guardians need only complete Column 2 below and attach a letter indicating the applicant's status.
- In cases of divorce or separation, both the custodial and the non-custodial parent must submit financial information. Exceptions are only considered when the non-custodial parent has not been involved in the applicant's life for some period of time. Please describe the non-custodial parent's contact in the statement requested below about your household structure.
- Please check one:
This form reports _____ Combined Parent Info _____ Custodial Parent Info _____ Non-custodial Parent Info

All financial information provided to DEEP is confidential and will be used only to process this application.

COLUMN ONE

Annual Household Income
Annual Salary before taxes: \$ _____
Alimony/Spousal Maintenance: \$ _____
Child support: \$ _____
Interest, dividends: \$ _____
Public Assistance: \$ _____
Other income: _____ \$ _____
Total Income: \$ _____

Parent/Guardian Assets

Cash, CD's, Savings, Checking accounts \$ _____
Stocks, investments, funds, etc. \$ _____
Home \$ _____
Other Real Estate \$ _____
Vehicles \$ _____
Other Assets \$ _____

Applicant savings & assets \$ _____

Liabilities:

Mortgages \$ _____
Car Loans \$ _____
Student Loans: \$ _____
Other liabilities (please list)
_____ \$ _____
_____ \$ _____

COLUMN TWO

Program Name _____

Program Length (dates) _____

Program Tuition \$ _____

Maximum funding parent/guardian can provide towards tuition (not including travel and equipment): \$ _____

Maximum funding applicant can provide \$ _____

Amount available from other sources (please list)
_____ \$ _____
_____ \$ _____

Amount requested from DEEP \$ _____

HOUSEHOLD INFORMATION

Please attach an additional sheet detailing:

- ❖ Your household structure (number in household, ages of dependent children, etc...)
- ❖ Why you need financial assistance
- ❖ Any unusual, special or changing financial circumstances you wish us to consider
- ❖ How you will fund this program if DEEP is unable to fully meet your request.

SIGNATURE

I declare the information provided to be accurate to the best of my knowledge.

Date

Signature of Parent/Guardian