



PENNINGTON SOIL & WATER CONSERVATION DISTRICT

201 Sherwood Avenue South
Thief River Falls, MN 56701
Phone: (218) 683-7075
www.penningtonswcd.org

Summer Camp Scholarship Application

Child's First and Last Name:	Child's Birthdate:
Parent's First and Last Name(s):	
Mailing Address (Street City, State Zip):	
Parent's Email:	Parent's Phone Number:
Camp Name and Location:	
Using a separate sheet, write an essay about why you are excited to attend this camp.	

Submittal Instructions (**Due June 1st, 2026**)

Please submit completed application, proof of enrollment, and essay to Marisa
Newton: marisa.newton@mnsxcd.org

Award winner announced by June 30, 2026.

*Note: Scholarship payment will be issued to student upon camp report to the
SWCD Board of Supervisors.

Parent Signature: _____ Date: _____