



**JB Wright Financial Assistance for Medical Expenses Scholarship Application  
Children’s Burn Foundation of Florida, Inc. – Camp Tequesta**

Please briefly explain how you would benefit from these funds:

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All the information provided is true and complete to the best of my knowledge. If asked by an authorized official, I agree to provide proof of the information that I have given on this form. Any falsification will result in ineligibility for funds

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

After completion of this form, please mail it to me at:

Carrol Ann Stankovitz, Camp Coordinator  
Children’s Burn Foundation of Florida, Inc.  
1122 SW 2<sup>nd</sup> Street  
Boca Raton, Florida 33486-4550228  
Cell Phone Number: 561-756-6119  
Email: castankovitz@gmail.com

Medical Expense Scholarship decisions will be made by the board of directors. If you have any questions completing this process, please contact me. Thank you.