



Scholarship Assistance Application

Englewood Parks and Recreation recognizes that some of the residents in Englewood require financial assistance to attend certain recreational activities. The information requested below is confidential and is necessary to help determine the degree of need for each applicant. All information must be filled in or the application will be returned unaccepted. If you are applying for multiple scholarships, a separate application is required for each participant and for each activity. Applications will be kept strictly confidential.

Participant's Name: _____ Age: _____

Address: _____

Home Phone: _____ Work Phone: _____

This scholarship will be used for: Activity: _____
Class # _____

Knowing that the normal fee for this program is \$ _____, what do you think you can pay? \$ _____

Parent/Guardian Information

Father's Name: _____

Mother's Name: _____

Employer: _____

Number of children living at home: _____ Number of adults in household: _____

Are you presently receiving assistance from any of the following programs? Please check all that apply:

- Free or reduced school lunch program
- Aid to Families with Dependent Children (AFDC)
- State Welfare Assistance
- Other _____

Briefly describe need for scholarship: _____



TOTAL YEARLY FAMILY GROSS INCOME (include child support if applicable)

___ Under \$9,570	___ \$9,570 to \$12,830	___ \$12,830 to \$16,090
___ \$16,090 to \$19,350	___ \$19,350 to \$22,610	___ \$22,610 to \$25,870
___ \$25,870 to \$29,130	___ \$29,130 to \$32,390	___ \$32,390 to \$37,896
___ \$37,896 to \$42,107	___ \$42,107 to \$47,850	___ \$47,850 to \$53,891
___ \$53,891 to \$59,922	___ Above \$59,922	

When applying for a scholarship for an individual, Englewood Parks and Recreation may require a copy of your latest 1040 Income Tax Form or accepted form to verify your income. This information must be updated with each calendar year.

Participant/ Parent/ Guardian Signature _____ Date _____

Office Use Only

Scholarship ___ Granted ___ Denied

Amount of Scholarship: \$ _____

Balance of fee due: \$ _____

Parks and Recreation Director/Designee _____ Date _____