

Recreation Youth Scholarship Program

APPLICATION FORM:

PART 1 – PARENT/LEGAL GUARDIAN INFORMATION

Parent/Legal Guardian Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

I, the undersigned, understand that the information given will be kept confidential and may be verified by the local or federal government. The information provided is true and complete to the best of my knowledge and belief. I consent to the disclosure of such information for purposes of income and verification related to my/our application for financial assistance. I understand that any willful misstatement of material fact will be grounds for disqualification. **I agree to pay any outstanding balance I have on my household account after all scholarship money has been applied.**

Applicant's Signature _____

Date _____

PART 2 – CHILD'S INFORMATION (FOR OFFICIAL USE ONLY)

Child's Name and Date of Birth	May – August Session				September-December Session				January – April Session			
	Class Number	Class Fee	Scholar Amount	Fee Paid	Class Number	Class Fee	Scholar Amount	Fee Paid	Class Number	Class Fee	Scholar Amount	Fee Paid
NAME: _____ DOB: _____ E: _____ R: _____												
NAME: _____ DOB: _____ E: _____ R: _____												
NAME: _____ DOB: _____ E: _____ R: _____												
NAME: _____ DOB: _____ E: _____ R: _____												

CHECKLIST FOR OFFICIAL USE ONLY – COPIES OF ALL FORMS REQUIRED		<input type="checkbox"/> HAND OUT GENERAL INFORMATION FORM
Date: _____	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	Authorizing Staff: _____
Copy of Proof of household income (Social Security Numbers Redacted)		
<input type="checkbox"/> 1040 income tax return	<input type="checkbox"/> W2's	<input type="checkbox"/> SSI/SSDI Benefit Statement
		<input type="checkbox"/> State Assistance income statement form
Copy of Proof of City of Pasco Residency		
<input type="checkbox"/> Current Utility Bill (Power/Water)	<input type="checkbox"/> Housing Lease	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Print Income Eligibility Calculator (CDBG Online)	<input type="checkbox"/> Print Self-Certification of Annual Income (CDBG Online)	
HUD ELIGIBILITY:	<input type="checkbox"/> Ext Low	<input type="checkbox"/> Low <input type="checkbox"/> Moderate