



# BOYS & GIRLS CLUB OF SOUTH PARK

## Scholarship Application Form 2014 – 2015 Summer/School Year

Mother/Guardian's Name: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Employed? Yes \_\_\_\_\_ No \_\_\_\_\_ How Long? \_\_\_\_\_

Employer: \_\_\_\_\_

Employers Address and Phone: \_\_\_\_\_

Father/Guardian's Name: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Employed? Yes \_\_\_\_\_ No \_\_\_\_\_ How Long? \_\_\_\_\_

Employer: \_\_\_\_\_

Employers Address and Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Please list total annual income for all household members (gross income) \$ \_\_\_\_\_

\_\_\_\_\_ **By initialing here, I attest that my combined gross family income is less than \$75,000**

Please indicate any other financial assistance you receive (free or reduced lunch, subsidized housing, food assistance (SNAP), TANF, Social Security (SSI or SSID), or any other financial scholarships):

\_\_\_\_\_  
\_\_\_\_\_

Number of people who reside in home? \_\_\_\_\_

**Please list the names and ages the children in your family you wish us to scholarship below.**

Child's Name	Age	Grade (As of Sept 2014)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Please describe your need for scholarship funding and any other information that should be considered. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list the names and ages of any children in your family that currently or previously attended the Boys & Girls Club of South Park (include the years and seasonal program attended).  
\_\_\_\_\_  
\_\_\_\_\_

### Scholarship Policy

The Boys & Girls Club has a commitment to serve children, especially those from disadvantaged circumstances. We strive to serve as many children as possible, given our available resources. In this spirit there are limitations on what programs and services we can offer for free or reduced rates. Scholarship money does not apply toward field trip fees or other special events. The Boys & Girls Club of South Park reserves the right to ask for income verification should a scholarship be awarded.

In order to assist those families in need and reach as many kids as possible we have enacted the following policy:

1. I understand that work scholarships are available. Work scholarships are only given to those members who are in 6<sup>th</sup>-12<sup>th</sup> grades.
2. A scholarship application must be completed and returned to the club prior to starting the program and scholarship acceptance.
3. Families who meet qualifications are eligible for scholarships and work scholarships. Eligibility is based on annual income, lawful presence and kinship of children.
4. **This application applies only to the 2014 – 2015 Summer/School Year**
5. All applications must be fully completed and turned in by ASAP to allow time for processing. Membership fees are not waived during application processing.
6. Any requests for exceptions to our policy must be made in writing to the Executive Director and be presented with this scholarship application.

\_\_\_\_ (initial) I have read the above scholarship policy and understand the eligibility qualifications and availability of scholarship programs.

\_\_\_\_ (initial) I understand that a scholarship award is not guaranteed and is based on availability and offered on a first come first serve basis.

\_\_\_\_ (initial) I attest that we are a family who reside within Park County and our children listed on this application are within the 5<sup>th</sup> degree of kinship and we are lawfully present in the United States.

\_\_\_\_ I have attached a copy of my Colorado Driver's License listing my current address.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

#### ADMIN USE ONLY

Circle One: Approved Denied Date: \_\_\_\_\_ By: \_\_\_\_\_

Parent Co-Pay: \_\_\_\_\_