



# Scholarship Application

*Before completing this application, please review the general information and requirements on the reverse side.*

Program for which you are requesting a scholarship: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Parent/Legal Guardian: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Marital Status** (Select one)     Single     Married     Divorced     Widowed

Number of dependents under 18 years of age in household: \_\_\_\_\_

**Do you receive:**     Social Security     Public Welfare     Unemployment

**Are you currently employed:**     Yes     No

Dependent's First Name	Dependent's Last Name	Date of Birth	Grade & Name of School	Relationship to Applicant

Are any of your children recipients of the free and/or reduced lunch program?     Yes     No

**List references that may help you receive scholarship approval:**

Name & Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name & Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**OFFICE USE ONLY**

Scholarship: \_\_\_\_\_ App'd \_\_\_\_\_ Denied \_\_\_\_\_

If Approved, amount: \_\_\_\_\_

If Denied, reason: \_\_\_\_\_

Director of Community Recreation Signature: \_\_\_\_\_ Date of Notification: \_\_\_\_\_

Customer Relations Manager Signature: \_\_\_\_\_

## Scholarship Application General Information

1. Only Batavia Park District residents qualify for the Scholarship Program.
2. Scholarship Applications will not be reviewed or considered if they are incomplete or missing the required supporting documents. The completed application should accompany your Program Registration Form.
3. All applicant information will be kept confidential and must be true and accurate.
4. The Director of Community Recreation will review all applications. An interview may be required before a scholarship is awarded.
5. Scholarships will be awarded based upon need and the availability of District funds.
6. Scholarships will be awarded for only 50% of a program fee. The remaining balance is to be paid in full, or a payment plan can be created by the Director of Community Recreation if requested.
7. An individual may not receive more than \$400 in scholarship funds per Park District fiscal year, which begins January 1.
8. Applicants must re-apply for scholarships each Park District fiscal year, which begins on the calendar year January 1.
9. Scholarship funds may not be requested for adult athletic leagues, trips, special events, contractual programs or Geneva co-ops.
10. Any scholarship recipient who drops out of a program will no longer be eligible for scholarship assistance for

## Scholarship Application Requirements

The Batavia Park District utilizes the poverty guidelines, published annually by the U.S. Department of Health & Human Resources, in order to determine scholarship eligibility. The Batavia Park District will consider scholarships for those families that fall into the 130% category according to the HHS poverty guidelines.

### Income Eligibility Guidelines January 2024—December 2024

#### Free Meal 130% Federal Poverty Guidelines

<u>Household Size</u>	<u>Monthly</u>	<u>Yearly</u>
1	\$1,632	\$19,578
2	\$2,215	\$26,572
3	\$2,798	\$33,566
4	\$3,380	\$40,560
5	\$3,963	\$47,554
6	\$4,546	\$54,548
7	\$5,129	\$61,542
8	\$5,712	\$68,536
For each additional family member add	\$583	\$6,994

## Document Verification

Copies of all documents must be included with application. Applications without required documentation will be delayed in processing.

## Residency

Choose one: Option A or B

Option A (please select <b>one</b> item form below)	Option B (please select <b>two</b> items from below)
<input type="checkbox"/> Valid Driver's License with your Batavia address <input type="checkbox"/> Valid State-Issued ID with your Batavia address	<input type="checkbox"/> Voter Registration Card <input type="checkbox"/> Tax Bill <input type="checkbox"/> Current Lease <input type="checkbox"/> Vehicle Registration <input type="checkbox"/> Home Phone Bill <input type="checkbox"/> Utility Bill

## Income

Choose One: Option A, B, or C

### Option A

Most recent SNAP/TANF award letter (**Note: All dependents listed on page one of the application must be listed on SNAP/TANF award letter**)

### Option B

Most recent Federal tax return. Eligibility will be based on applicant's adjusted gross income shown on line 11 on form 1040. (**Note: Children must be listed as dependents**)

### Option C: Proof of Income (provide all available)

- One month of paycheck stubs for all qualifying individuals
- Unemployment compensation
- Child Support
- Social Security/Disability
- Current Link Statements
- Other sources of income