Batavia Park District

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 2025—December 2025

Free Meal 130% Federal Poverty Guidelines

Household Size	Monthly	Yearly
1	$1,695	$20,345
2	$2,291	$27,495
3	$2,887	$34,645
4	$3,483	$41,795
5	$4,079	$48,945
6	$4,675	$56,095
7	$5,270	$63,245
8	$5,866	$70,395
For each additional family member add	$596	$7,152

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 **one** item form below)	**Option B** (please select **two** items from below)
☐ Valid Driver's License with your Batavia address	☐ Voter Registration Card
☐ Valid State-Issued ID with your Batavia address	☐ Tax Bill
	☐ Current Lease
	☐ Vehicle Registration
	☐ Home Phone Bill
	☐ 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