



# Everybody Plays

Approved \_\_\_\_\_ Date \_\_\_\_\_

Logged \_\_\_\_\_ County \_\_\_\_\_

# Recreation Scholarship Application

Please allow up to one week for processing

### Head of household requesting assistance

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Total household monthly gross income: \_\_\_\_\_ Number of people in household: \_\_\_\_\_

Are you employed? \_\_\_\_\_ Employer: \_\_\_\_\_

Please fill in all the information below for each household member even if they will not be registering for a class this term. If you need more space, please attach an additional sheet.

Current award letter from DSHS?  Female Head of Household?  Homeless?

| Name | Special Needs? | Ethnicity* | Birth Date | Age | M/F |
|------|----------------|------------|------------|-----|-----|
|      |                |            |            |     |     |
|      |                |            |            |     |     |
|      |                |            |            |     |     |
|      |                |            |            |     |     |
|      |                |            |            |     |     |
|      |                |            |            |     |     |

\*In order to utilize Community Development Block Grant dollars for scholarships, we must ask you to place the initials that apply in the "Ethnicity" box beside each household member's name.

- AI American Indian/Alaska Native                      As Asian    AB African American/Black
- P Native Hawaiian/Pacific Islander                As/W Asian & White                              AB/W African American & White
- O Other Multi-Racial                                      W White (non-Hispanic)                        WH White (Hispanic)
- AI/W American Indian/Alaska Native & White      AI/AB American Indian/Alaska Native and African American

You must attach paperwork which validates your income, i.e. tax form from the most recent year (plus current pay stub) or TANF/SSI Statement (no additional pay stub is required).  
If you have a complete lack of income, no address or other special circumstance, please describe your situation on a separate piece of paper.

I hereby agree to release, save and hold harmless the City of Vancouver and their respective officials, administrators, employees, volunteers and agents from any and all liability and claims for any damage or injury brought by me, my family, estate, heirs, or assigns arising out of my enrollment or participation in this program except as may arise solely from the gross negligence of the City of Vancouver or from the acts of third parties. My signature below signifies that I voluntarily agree to all the terms and conditions contained herein.

I certify that all of the information provided on this form is true and correct and that all income is reported. I understand that this information is being given for the receipt of Recreation Scholarship assistance; that City officials may verify the information on the application; and that deliberate misrepresentation of the information may subject me to prosecution under applicable laws.

Signature: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Please mail completed application to: **Vancouver-Clark Parks and Recreation,  
Attn: Rec Scholarships  
PO Box 1995  
Vancouver, WA 98668**

Or bring it in to:      Marshall/Luepke Center      1009 E McLoughlin      487-7100  
                                 Firstenburg Center            700 NE 136 Ave            487-7001

# Recreation Scholarship Guidelines

In order to qualify, your household's monthly gross income must fall within the Income Limits shown on this sheet. You must attach paperwork which validates your income, i.e. tax form from the most recent year (plus current pay stub) or TANF/SSI Statement (no additional pay stub is required). All adults (19 and over) in the household must provide proof of residency.

Scholarship assistance will be determined by Vancouver-Clark Parks and Recreation Scholarship Program Staff, on a case-by-case basis. The average is \$40 per family member per term, and no more than \$160 per family, subject to change.

One application/registration per household may be submitted per registration period. Registration periods are January-April, May-August and September-December. Please indicate on this form the classes your family member(s) wishes to sign up for this registration period. Allow one week for approval. If you are approved, and the class has openings, you will receive notification and a receipt confirming successful registration.

There may be a wait list for their spot in class, so please call five days prior, if you can't attend, in order to be considered for future scholarship awards.

If program funds run out during the year, it is possible the scholarship program will need to be halted, and assistance for all will be denied until funding is renewed.

| Income Limits |                  |
|---------------|------------------|
| Family Size   | Household income |
| 1             | \$2,079          |
| 2             | \$2,375          |
| 3             | \$2,671          |
| 4             | \$2,967          |
| 5             | \$3,204          |
| 6             | \$3,442          |
| 7             | \$3,679          |
| 8             | \$3,917          |

Example: if three people live in your household, the gross family monthly income must be less than \$2,671 in order to qualify for a Recreation scholarship. (HUD 50% of area median)

*As of January 1, 2011, there is no longer an option to buy a fitness/aquatics pass.*

Allotments are to be used solely for youth and Access to Recreation (ATR) registrations (classes, leagues or camps) ONLY.

## Vancouver-Clark Parks and Recreation Scholarship Activity Registration

Please indicate the activities in which your family would like to participate. After this form is submitted, you will not be able to register for anything else until the next trimester, or Activity Guide release. Please allow one week for your application to be approved and the registration confirmed. **The award is limited to \$40 per youth or ATR participant (no more than \$160 per family).**

| <u>Name</u> | <u>Class Name</u> | <u>Class #/Session</u> | <u>Fee</u> |
|-------------|-------------------|------------------------|------------|
|             |                   |                        |            |
|             |                   |                        |            |
|             |                   |                        |            |
|             |                   |                        |            |
|             |                   |                        |            |
|             |                   |                        |            |

Please check this box if special accommodation is needed. Total:

Staff Use Only! Amount of scholarship approved: \_\_\_\_\_ Amt to be paid by applicant: \_\_\_\_\_  
 Receipt Number: \_\_\_\_\_ Date Approved: \_\_\_\_\_ Approved by: \_\_\_\_\_  
 Scholarship denied reason: \_\_\_\_\_