



## ***Parks & Recreation Scholarship Application***

### **Scholarship Eligibility and Guidelines**

1. Applications will be accepted year-round for all programs, activities and camps. Financial assistance is not available for field trips, trips & tours or for athletic leagues.
2. **Submittal of the Scholarship Application does not guarantee award of financial assistance.** Applications will be evaluated for eligibility. Notification will be made to all applicants once the evaluation process has been completed.
3. **Submittal of the Scholarship Application does not guarantee a reserved space in any Program, Activity or Camp.** To guarantee a space in a program, activity or camp, prior to notification of financial assistance, the participant must register per the Registration Process of the Palm Coast Parks and Recreation Department.
4. One application must be completed for each individual.
5. Applicants must demonstrate financial need based on the current, established federal guidelines for determination of eligibility for the free and/or reduced lunch program.
6. Verification of participation in the Flagler County School District Free/Reduced Lunch program is required.
7. Applicants eligible for reduced lunch program (as verified by a letter from the Flagler County School District) will be eligible for a partial scholarship (applicant is responsible for 50% of camp fee)
8. Applicants eligible for free lunch program (as verified by a letter from the Flagler County School District) will be eligible for a full scholarship.
9. Scholarship funding does not include field trips. Participation on field trips is voluntary and must be paid in advance by the applicant.
10. Those awarded scholarship funding must comply with all Palm Coast Parks and Recreation registration/participation rules and policies.

**\*Those who fail to provide the required documentation will be ineligible for scholarship funding.**

**\*\*2015 Summer Camp scholarship applications must be submitted no later than 4:00 PM, Friday, May 15.**



## ***Parks & Recreation Scholarship Application***

**Application Check List\*: Please submit the documents below with the Scholarship Application.**

- Application Check List
- Completed Scholarship Application Form
- Completed Palm Coast Parks & Recreation Registration Form
- Completed Palm Coast Parks & Recreation Youth Supplement Form
- Verification letter from Flagler County School District verifying participation in the free or reduced lunch program
  
- Documentation of income for ALL household members, to include:***
  - Copy of most recent tax return
  - Documentation of income
    - Two Recent Pay Stubs, OR
    - Two Recent Unemployment Compensation receipts
  - Documentation of Federal Assistance (welfare), Social Security, SSI, or other benefits
  - Child or spousal support
  - Pension or Retirement Benefits
  - Other Income

**Appropriate documentation must be attached for this application to be considered.**

Participant has received a City of Palm Coast Scholarship before:  Yes  No Date: \_\_\_\_\_



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**Applicant Name:** \_\_\_\_\_  
Last First

**Address:** \_\_\_\_\_  
Street City State

**Phone:** \_\_\_\_\_  
Home Cell Work

**Email:** \_\_\_\_\_

**List below all members of the household residing at the residence listed above:**

Last Name	,	First Name	Relationship	Age	Employed?	Annual Income
					<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
					<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
					<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
					<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
					<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
					<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
					<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
					<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
					<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
<b>Total Members in Household:</b>						<b>Total Gross Income:</b> \$

**Check all that apply to your current situation:**

SOURCE OF INCOME			Annual Income
Employment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	\$
Pension/Retirement	<input type="checkbox"/> Yes	<input type="checkbox"/> No	\$
Other Income	<input type="checkbox"/> Yes	<input type="checkbox"/> No	\$
Unemployment Compensation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	\$
Child or Spousal Support	<input type="checkbox"/> Yes	<input type="checkbox"/> No	\$
Federal Welfare Recipient	<input type="checkbox"/> Yes	<input type="checkbox"/> No	\$
Free/Reduced School Meal Program	<input type="checkbox"/> Yes	<input type="checkbox"/> No	\$
Social Security Benefits (Disability/Survivor/Other)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	\$
Other:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	\$
Other:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	\$
<b>TOTAL</b>			\$



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Please complete the below. Use the reverse side if needed.

In your own words, briefly explain why this applicant should be considered for scholarship assistance:

Would you be willing to volunteer 1 hour of your time to assist in this fundraising activity?

Yes  No

If no, please explain:

**I understand that this application form does not guarantee a scholarship award or an opening or acceptance into the program desired. I attest that the information contained herein is accurate and truthful.**

\_\_\_\_\_  
**Signature Legal Parent/Guardian**

\_\_\_\_\_  
**Date**

STATE OF FLORIDA, COUNTY OF FLAGLER

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 2015, by \_\_\_\_\_ (check one)  who is personally known to me or  who produced a Florida driver's license as identification.

\_\_\_\_\_  
Notary Public

Print Name: \_\_\_\_\_

My Commission expires: \_\_\_\_\_

**Office Use Only Below this Line:**

\*\*\*\*\*

Approved  Not Approved:

Total Award : \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM  
RECREATIONAL SCHOLARSHIP STIPENDS**

Assistance for the City of Palm Coast Recreational Scholarship program was made possible through the Community Development Block Grant (CDBG) program which is funded by the U.S. Department of Housing and Urban Development (HUD). HUD requires the City to gather statistical data for informational purposes only. Providing the requested information is strictly voluntary. Please complete the form below.

1) Ethnicity: Hispanic or Latino  Yes  No

2) Race: Please check next to your Race (Participant):

<input type="checkbox"/>	White	<input type="checkbox"/>	Black African American & White	<input type="checkbox"/>	Native Hawaiian or Other Pacific Islander
<input type="checkbox"/>	Black or African American	<input type="checkbox"/>	American Indian Or Alaskan Native	<input type="checkbox"/>	American Indian or Alaskan Native & Black
<input type="checkbox"/>	Asian	<input type="checkbox"/>	Asian & White	<input type="checkbox"/>	American Indian or Alaskan Native & White
<input type="checkbox"/>	Other Multi Racial	<input type="checkbox"/>		<input type="checkbox"/>	

The Data above is captured for informational purposes only as required by the U.S. Department of Housing and Urban Development for the Community Development Block Grant (CDBG) program.