



JUNE 16, 2016 - JUNE 17, 2017

APPLICATION FOR SCHOLARSHIP OR REDUCED FEES

Please submit to your preferred Community Center, Pool, Environmental Learning Center, Amy Yee Tennis Center, etc.

Seattle Parks and Recreation provides a limited number of scholarships for those who qualify. The information requested below is confidential and necessary to help determine the degree of need for each family. **ALL information must be filled in or the application will be returned for completion.** Please fill out the form in **black** or blue ink. **Proof of household income is required with ALL scholarship/ reduced fee applications.** Please see information below for valid forms of income verification.

Main Account Barcode # : _____ (Please inquire with Staff if you do not have or know your barcode number)

Applicant Name or Parent/Guardian of Child(ren): _____

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Email: _____ **Home Number:** _____ **Mobile Number:** _____

Emergency Contact (Name): _____ **Phone Number:** _____

If application is for a child or children who do they live with (check one):

Mother only: _____ **Father only:** _____ **Both parents:** _____

Mother & Stepfather: _____ **Father & Stepmother:** _____ **Grandparents:** _____

Foster parents: _____ **Other (specify):** _____

How many adults live in the household? _____ **How many people financially provide income for this family?** _____

How many children live in the household? _____ **List their age(s):** _____

VERIFICATION OF HOUSEHOLD INCOME – 1040 Income Tax Form required

Seattle Parks & Recreation requires a copy of the **2015 1040 Income Tax Form** (if filing separately, both 1040's must be submitted). If you are applying for scholarship but have not filed your taxes for the current year (must provide a copy once filed) or **if you are not legally required to file federal taxes you may provide alternate income verification from the list below.** Failure to provide appropriate financial documentation will cause a delay in processing your application and/or cause eligibility to be **revoked**. Please list all household income. Income verification may need to be submitted multiple times if family income changes during the scholarship cycle in which you applied. Applicants who are unemployed or students **MUST** submit updated information quarterly. *Seattle Parks & Recreation values your privacy and will make every effort to ensure information provided remains confidential.*

Monthly/Yearly Income Verification	Amount	Monthly/Yearly
***2015 1040 Tax Form (Document must be signed or have federal pin number) (Please no handwritten tax documents)	\$	
Current TANF / Welfare award letter	\$	
Full-time student verification or current class schedule and Financial Aid paperwork	\$	
Proof of current Social Security benefits (SSA benefit statement or SSA-1099)	\$	
Proof of Disability pay (SSI or Long Term Disability statement)	\$	
Gross paycheck stubs before taxes (1 month of 32+ hours or 2 months if 31 hours or less for all household income)	\$	
Unemployment statement	\$	
Proof of Retirement statement	\$	
Child support payments (not used as main verification only for additional income)	\$	
TOTAL INCOME	\$	

I, the undersigned, do hereby certify that the information on this application is true and correct. I understand that false information or information found to be incorrect will result in termination of scholarship provided by Seattle Parks and Recreation. I understand that this information is being given for the receipt of City funds and that deliberate misrepresentation of this information may subject me to prosecution under applicable state and federal laws. I hereby give my permission for Seattle Parks and Recreation staff to verify information on the application.

Signature of Applicant: _____ **Date:** _____

Print name of Applicant: _____

SEATTLE PARKS & RECREATION USE ONLY

Site Staff Signature: _____ **Site:** _____ **Position:** _____ **Date:** _____

Scholarship Office Only

Approved By: _____ **Date:** _____

Childcare % _____ **Gen Rec/Aquatic Supplemental %** _____ **Pool Reduced Fee %** _____

Participant Information - Please list all members of your household including applicant

Participant		<input type="checkbox"/> Youth	<input type="checkbox"/> Adult	<input type="checkbox"/> Senior Adult (50+)
Name:		Birth Date:		Male: <input type="checkbox"/> Female: <input type="checkbox"/>
Ethnicity: <i>Ethnic origin information is used for statistical purposes only.</i>	Asian: <input type="checkbox"/>	Black: <input type="checkbox"/>	Hispanic: <input type="checkbox"/>	White: <input type="checkbox"/> Two-or-more Races: <input type="checkbox"/>
	Native American/Alaska Native: <input type="checkbox"/>		Native Hawaiian/Other Pacific Islander: <input type="checkbox"/>	
School Age Care Request—Only if Applicable (Non-Enrichment Program)		School Age Care Site:		
Summer Week 1: <input type="checkbox"/>	Summer Week 3: <input type="checkbox"/>	Summer Week 5: <input type="checkbox"/>	Summer Week 7: <input type="checkbox"/>	Summer Week 9: <input type="checkbox"/>
Summer Week 2: <input type="checkbox"/>	Summer Week 4: <input type="checkbox"/>	Summer Week 6: <input type="checkbox"/>	Summer Week 8: <input type="checkbox"/>	Summer Week 10: <input type="checkbox"/>
Before School Care: <input type="checkbox"/>		After School Care: <input type="checkbox"/>		Professional Development Days: <input type="checkbox"/>
Winter Break Camp Week 1: <input type="checkbox"/>		Winter Break Camp Week 2: <input type="checkbox"/>		Day Between-Semesters: <input type="checkbox"/>
Spring Break Camp: <input type="checkbox"/>		SPS Nov Conference Days: <input type="checkbox"/>		Mid-Winter Break Camp: <input type="checkbox"/>

Participant		<input type="checkbox"/> Youth	<input type="checkbox"/> Adult	<input type="checkbox"/> Senior Adult (50+)
Name:		Birth Date:		Male: <input type="checkbox"/> Female: <input type="checkbox"/>
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