

CRITERIA / DESCRIPTION:

The Parks & Recreation Scholarship Award is determined by eligibility in the National School Lunch Program, which is based on household size and overall income guidelines. If you do not participate in this program, a letter of financial need/hardship will be required.

SCHOLARSHIP APPLICATION TERMS AND GUIDELINES:

- 1) A letter of financial need or a copy of the letter proving participation in the Free/Reduced Lunch Program must be provided **at the time of application**. *Incomplete applications will not be considered.*
- 2) Please provide remaining payment by credit card, cash, or check made payable to: City of Gahanna. *Payment will not be processed until program registration has been confirmed.*
- 3) All scholarships are subject to availability of funds and class space. The scholarships are awarded on a first-come, first-serve basis for eligible recipients.
- 4) All fees are based off the appropriate resident or non-resident rate of the program/membership for which they are applying.
- 5) Participant must attend the program for which they receive scholarship funds to be eligible to receive funds the following year.
- 6) Gahanna-Jefferson School District Free Lunch recipients qualify for the 75% Scholarship. Reduced Lunch recipients qualify for the 50% Scholarship. *Applicants do not need to be students at Gahanna-Jefferson Public Schools to qualify.*
- 7) Once your application is received, our staff will review it and determine eligibility. Applicants can expect a call or email that will advise them of the eligibility status and to complete your payment and enrollment.

SCHOLARSHIP TYPES AND COVERAGES:

<u>Scholarship Type</u>	<u>Covered by Scholarship</u>	<u>Owed by Participant*</u>
75% Scholarship	75% Program Fees	25% Program Fees
50% Scholarship	50% Program Fees	50% Program Fees

*Additional program fees may apply, see reverse side for more details based on specific programs.

Thank you to the Gahanna Parks & Recreation Foundation for support of the Gahanna Parks & Recreation Scholarship Program.

Parent/Guardian's Name: _____
First Middle Last

Applicant Name (if different from above): _____
First Middle Last

Applicant's Date of Birth: ____/____/____ Parent Email Address: _____
Day Month Year

Address: _____
Street Address Apt. # City Zip Code

Home Phone: _____ Cell Phone: _____

Please indicate which program/membership you are interested in applying scholarship funds to:

Aquatic Membership: _____
Indicate Membership Type

** Please additionally submit the Pool Membership Application*

Summer Day Camp: _____
Location Activity/Section Number

** An annual administrative fee of \$30 per household will also apply.*

** A maximum award equivalent to 5 weeks of camp may be issued, per applicant.*

Other Recreation Program: _____
Activity Name Activity/Section Number

I, _____, certify that the information provided above and enclosed is correct.
Parent/Guardian/Applicant - Print Name

** Please note this does not apply to private or semi private swim lessons*

Applicant Signature: _____ Date: _____
**Parent or Guardian if Applicant is a minor*

For Staff Use Only:

Date Received: _____

Scholarship Level Approved:

Date Approved: _____

_____ 75% Scholarship

Approved By: _____

_____ 50% Scholarship