



# SCHOLARSHIP APPLICATION

1140 Broadway PO Box 514 Seaside, OR 97138

503-738-3311 www.sunsetempire.com

The Sunset Empire Park & Recreation District (through the support of the Sunset Park & Recreation Foundation) provides scholarship funds for those wishing to participate in programs and/or gain access to District Facilities. The scholarship program provides **partial** fee waivers for those who meet the requirements. Scholarship fee waivers are available for up to 50% program subsidies, depending on funds availability and eligibility of applicant.

Scholarship applications are processed quarterly and scholarship deadlines are indicated below:

	Spring (April 1-June 30)	Summer (July 1-September 30)	Fall (Oct. 1-December 31)	Winter (January 1-March 31)
<b>Application Deadline</b>	March 15	June 15	September 15	December 15
<b>Notification of Scholarship Approval</b>	March 25	June 25	September 25	December 26

After three consecutive "quarters" in which scholarship funds were given to an applicant, priority will be given to others.

Scholarship recipients are eligible to reapply after each (and following) quarter only if the following conditions are met:

- Paperwork is complete and turned in prior to the application deadline.
- Volunteer requirement is met (see reverse side for more information).
- Scholarship recipient has complied with general attendance and behavior standards as laid out by the individual program manager.

Please indicate the program(s) that you are applying for scholarship funds for with an "X":

Monthly Pass Single (\$60)	Preschool -2nd After School Adventure (Prices vary)	Swim Lessons (\$39)- Monthly	Seaside Swim Team (\$50-\$60)- Monthly
Monthly Pass Family (\$105)	3 <sup>rd</sup> -5 <sup>th</sup> Afterschool Adventure (Prices vary)	TaeKwonDo (\$45)- Monthly	Pottery (\$45)- Monthly
3-Month Pass Single (\$135)	Summer Camp (Prices vary)	Preschool (Prices vary)	Other (please indicate):
3-Month Pass Family (\$260)	Kindergarten Camp (Prices vary)	Start Smart Sports (\$75)- Per sport	Other (please indicate):

\*Prices indicated do not reflect the Resident Discount

**This form must be filled in completely with income verification documents attached.**

**APPLICANT INFORMATION:** (Please Print) **APPLICATION DATE:** \_\_\_\_\_ **TERM REQUESTED:** \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ DOB \_\_\_\_\_

Physical Address \_\_\_\_\_ Mailing Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Phone Home \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

**Household** Monthly Income before taxes (all living under same roof): \$ \_\_\_\_\_ # of people in household: \_\_\_\_\_

**Submit a copy of all current income verification documents for any person living under the same roof:**

- |   |   |
|---|---|
| ___ Previous Year's Front Page of most recent tax return. | ___ Most recent paystubs for all employed in household. |
| ___ Retirement Income                                     | ___ Workers Comp Benefits                               |
| ___ Child OR Spousal Support                              | ___ Social Security Income                              |
| ___ W-2 Wages and/or Form 1099 Wages                      | ___ School Financial Aid Letter                         |
| ___ Unemployment Weekly Wage Benefit Letter               |   |



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List Each Member Residing in Household:

FIRST NAME	LAST NAME	BIRTHDATE	RELATIONSHIP TO APPLICANT

Eligibility documentation is required. Check any public assistance program from which you receive benefits: **Must provide current letters of documentation.**

- Federal Food Stamps (SNAP) Award Letter (not card)
- Oregon Health Plan Membership
- Unemployment Letter
- DHS Benefit Letter
- NOHA Benefit Letter
- Free or Reduced Lunch Benefit Letter
- SSI Disability Benefit Letter
- TANF Benefit Letter
- Foster Care Documentation Letter with Child's Name Listed

### Volunteer Information

As a component of the scholarship program, scholarship recipients are required to volunteer **four (4)** hours for every quarter that they are awarded scholarship funds. Verification of hours must be submitted prior to the end of the quarter.

**I agree that I will volunteer no less than four hours with SEPRD before the end of my scholarship quarter and I understand that failure to do so will result in my ineligibility to apply for future scholarship opportunities.**

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby certify that all of the above information is true and correct and that all income is reported. I understand that deliberate misrepresentation may result in denial of eligibility for SEPRD Scholarships.

\_\_\_\_\_  
Signature of Applicant \_\_\_\_\_  
Date

### TO BE COMPLETED BY SEPRD STAFF

Date Received: Received by: \_\_\_\_\_ Approved by: \_\_\_\_\_ Approved for: \_\_\_\_\_ %

Programs Granted Scholarship For: \_\_\_\_\_ / \_\_\_\_\_

**Submit in writing, your answers to required questionnaire.** This must be completed at time of scholarship submission in order for your scholarship application to be considered. *Once applicants answer these questions, they do not need to answer them for subsequent scholarship requests.*

1. Why are you applying for scholarship funds from Sunset Empire Park & Recreation District?
2. How do you anticipate the program or facility access that you are applying for impacting your life?
3. Are you willing to comply with all of the requirements above, including the volunteer and re-application process?
4. Have you applied for a scholarship from SEPRD previously? If so, what was your experience?