



**Redmond Area Park and Recreation District Scholarship Form**

The Redmond Area Park and Recreation District is proud to be able to offer financial assistance to those in need for participating in our programs, and activities. The following conditions apply to our scholarship program:

- ❖ Applicants must be able to provide proof of financial hardship to RAPRD.
- ❖ RAPRD will approve or disapprove scholarships based on the information provided and the fund availability.
- ❖ Scholarship Limit for each participant is \$100 per recreation guide (\$300 per year, with a family cap of \$900 per year.) Excluding the After School and Summer in the Park Programs.
- ❖ Participant (In- District residents) must pay 50% of scholarship(s) for all programs \$50 or more.
- ❖ Applicants who live outside of the Park District boundary are eligible for a maximum 50% scholarship of each program cost.
- ❖ Each Scholarships recipient or a family member will be required to volunteer for the district.
- ❖ If participant does not show up to the program without giving sufficient notice (5 days prior) to RAPRD, than the applicant will be ineligible for future financial assistance.
- ❖ All information will be confidential and used only for the purpose of establishing eligibility for full or partial scholarships.
- ❖ **To determine eligibility, ALL applicant(s)/guardian(s) must present one of the following documents along with the scholarship application.**
  - **W-2 and or 1040 Tax Forms**
  - **Statement from the Department of Social Services**
  - **Other documents that prove income**

Participant Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Number of family living in household: \_\_\_\_\_ Monthly Household Income: \$ \_\_\_\_\_ (Attach Proof)

Legal Guardian(s): \_\_\_\_\_ Relationship \_\_\_\_\_

Do you currently receive the school lunch program? (Circle one) YES NO

Program signed up for: \_\_\_\_\_

**All scholarship applications are good for six months**

<b>FOR OFFICE USE ONLY:</b>			
Guide/Year: _____	Program: _____	Session: _____	
APPROVED	DENIED	Date: _____	Type: _____ Amount: _____
Pull From: _____	Processed By: _____		
Comments: _____			