

Scholarship Information & Application

West Linn Parks and Recreation awards a limited number of scholarships for City **residents only**. The information requested below is strictly confidential and is necessary to help determine the financial need for each applicant. All information must be completed for the application to be considered.

* Please complete the form below along with the **registration form** for selected programs and return **both** to the Parks and Recreation Department.

* After approval, applicants will be contacted for the participant contribution. Registration can be completed once the participant contribution is received.

* Participation is subject to class space availability at the time of completed registration. Program slots will not be held for the applicant.

* Class attendance is important. Failure to attend an approved class without notification to this office could jeopardize future scholarship opportunities.

- Based on applicants financial situation/scholarship fund balance, a scholarship of **50% or a maximum of \$50 per class or activity fee** may be granted. There is a **\$200 annual maximum per individual** and a **\$500 annual maximum per family**

Session: Fall, Winter/Spring, Summer (please circle one)

Participant Name

Applicant Name (if different)

Address

City

State

Zip

Home Phone

Alternate Phone Number

HOUSEHOLD INFORMATION

1. Family Size: # of Adults _____ # of Dependant Children _____

2. Adult Household Members: _____

Name: _____ Employer: _____ Work Phone: _____

Name: _____ Employer: _____ Work Phone: _____

3. Do you qualify for Federal School reduced or free lunch program? No _____ Reduced _____ Free _____
School Attending _____

4. What is your total household monthly income? _____

5. How much are you able to pay for program? _____

6. Please detail the benefits you anticipate from participating in this activity:

7. Please explain any unusual or extenuating expenses/circumstances, i.e. financial, medical, or disability, etc.

I certify, by signing below, the above is true and correct and the address listed is the principal address of participant and applicant.

Applicant Signature: _____ Date _____

Office Use only: Approved _____ Amount _____ Date _____