



Use this form only if income tax return cannot be obtained.

2026 SCHOLARSHIP INCOME VERIFICATION FORM

The following income verification is provided to Shawnee County Parks + Recreation in strict confidence and will be used only as supporting documentation to determine scholarship assistance approval. PLEASE NOTE: A VERIFICATION OF INCOME MUST BE COMPLETED FOR EACH/ALL HOUSEHOLD OCCUPANTS RECEIVING BENEFITS/PENSION/INCOME.

SCHOLARSHIP RECIPIENT'S NAME: _____
Last First

MAILING ADDRESS: _____

Complete the following columns for each household occupant receiving pension/benefits/income and attach third-party verification of income amounts.

- If unemployed: copies of checks, check stubs, pension/benefit letter showing amounts paid, bank statement (only if direct deposit)
- If employed: (new employer within the current year) copies of most recent pay check, check stubs, bank/statement (only if direct deposit) AND employer statement with date of hire.

GROSS MONTHLY PENSION, BENEFITS, OR INCOME FROM ALL SOURCES	
TYPE OF PENSION, BENEFIT, INCOME	AMOUNT
Social Security	
Unemployment	
Worker's Compensation	
Disability	
Employer _____	
Private Pension	
Other	
TOTALS	

I hereby state that my total present monthly income from all sources is \$ _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

01/05/22



parks.sncos.us