

## 2023 YOUTH SCHOLARSHIP PROGRAM

Notice of approval or decline will be received in 5 business days.

Shawnee County Parks + Recreation provide a wide variety of recreation opportunities for youth, yet not all families are able to afford the fees for participation in our programs. A youth scholarship program has been designed to assist those who meet the financial guidelines as set forth.

1. **Requirements:** Applications will not be processed without all required information.
  - Participants must be age 17 or younger and live within Shawnee County.
  - If current address is different from the one listed on income documents, you need to include copies of two of the following: a recent utility bill in your name at the current address, lease/mortgage statement, current state issued photo ID.
  - **A copy of parent(s)/guardian(s)' most recent federal income tax return showing Adjusted Gross Income and list of claimed Dependents.**
  - **ONLY** if tax return cannot be obtained, income verification worksheet and supporting documents must accompany the scholarship application. Any and all household income must be documented.
  - The scholarship application must be completed by a parent, guardian, or head of household.
  
2. **Uses:**
  - Upon approval, each qualifying household member may receive a specified amount of scholarship funds per year, dependent upon available funds.
  - Certain activities are excluded from scholarships.
  - Scholarship registrations are non-transferable and non-refundable.
  
3. **Completion Requirements:**
  - **Completed paperwork must be received prior to registration of the program.**
  - **Mail-in/Walk-in completed application and a copy of your federal income tax form.**
  
4. **Procedures:**
  - Scholarship approval is good from February 1, 2022 to January 31, 2024.
  - Scholarship applications will remain confidential with SCP+R.
  - SCP+R reserve the right to cancel class due to low enrollment and will follow refund policy.
  - Failure to attend a class/camp paid for by scholarship may result in the loss of future financial assistance.
  - Scholarships may be used in conjunction with online registration or at any SCP+R location including our administration office at 3137 SE 29th Street. For more information, please call 785-251-6800.

### 5. INCOME GUIDELINES

Parks + Recreation will follow the Federal income guidelines as set forth for free or reduced lunch programs.

<b>\$180 Scholarship</b>			<b>\$90 Scholarship</b>		
Household Size	Monthly Income	Annual Income	Household Size	Monthly Income	Annual Income
2	\$1,473	\$17,667	2	\$2,096	\$25,142
3	\$2,495	\$29,939	3	\$2,823	\$33,874
4	\$3,007	\$36,075	4	\$3,551	\$42,606
5	\$3,518	\$42,211	5	\$4,729	\$51,388
6	\$4,029	\$48,347	6	\$5,006	\$60,070
7	\$4,541	\$54,483	7	\$5,734	\$68,802
8*	\$5,052	\$60,619	8**	\$6,462	\$77,534
*For each additional household member add \$5,902 to the annual income.			**For each additional household member add \$8,399 to the annual income.		



*Meet you there!*

3137 SE 29th St Topeka, KS 66605  
Phone (785) 251-6800

**2023 Scholarship Application**

**Head of Household Information:** \_\_\_\_\_  
Name (Please Print)

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
( ) ( )

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

Date of Birth \_\_\_\_\_ Email Address \_\_\_\_\_

**List household member (17 years and younger) requesting a scholarship and were listed as a dependent on income tax return. Please fill an additional form out for each member requesting a scholarship.**

NAME	SEX	D.O.B.	Relationship to Head of Household

Total Household Size as **list on tax return** (Head of Household + all other household members)

Total Household Income = **(Adjusted Gross Income** from Federal Income Tax Form)

\$

**Attach copy of your federal income tax form with listed household and adjusted gross income.**

**Signature:** I certify that all of the above information is true and correct and that all income is reported. I understand that Shawnee County Parks + Recreation officials may verify the information on the application, and deliberate misrepresentation of the information may result in forfeiture of future scholarships. An adult must sign the application before it can be approved.

\_\_\_\_\_  
Signature of Parent, Guardian or Head of Household Date

Staff initials: \_\_\_\_\_ Date: \_\_\_\_\_



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

2023 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.

Table with 2 columns: TYPE OF PENSION, BENEFIT, INCOME and AMOUNT. Rows include Social Security, Unemployment, Worker's Compensation, Disability, Employer, Private Pension, Other, and TOTALS.

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

PARENT/GUARDIAN SIGNATURE: DATE:

01/05/22



parks.snco.us