



# SCHOLARSHIP PROGRAM INFORMATION

It is the goal of the Tukwila Parks and Recreation Department to provide Recreation opportunities to all interested people, regardless of income, that may not otherwise be able to participate in our programs.

## **APPLICATION INFORMATION & POLICIES**

1. **Applicants must qualify for assistance under the Household Income Guidelines.** The U.S. Department of Housing and Urban Development's current "Income Guidelines for King County" will be used as the basis for establishing the guidelines.
2. **Scholarship recipients must be residents of the City of Tukwila.** Proof of residency is required at the time of application. Acceptable forms of residency verification are picture ID and/or most recent Utility bills. Scholarships may also be available to children (ages 3-18) that do not reside in Tukwila, but do attend a Tukwila School District school. If this is your situation, you must provide verification.
3. **Fee waivers may be awarded to cover the cost of the program fees only.** Participants may be required to pay any registration fees and other applicable program fees (i.e. field trip fees, supply fees, etc.) prior to participation.
4. **Scholarships may not be available for all programs.** Some programs are exempt from funding, and some programs may only be eligible for partial funding. **Before and After School Program** scholarships are not available for September.
5. **Scholarships are dependent on funding availability** and awarded on a first-come, first-served basis.
6. **Scholarships are limited to one (1) fee waiver per participant per season.** Seasons are defined as:  
**Winter** = January through April  
**Spring/Summer** = May through August  
**Fall** = September through December
7. **Fee waivers may be for full or partial funding of the desired program.** Summer Camp scholarships are limited to a maximum award of one (1) week of camp. Sports Camp scholarships are limited to a maximum award of one (1) week of the camp.

## **APPLICATION PROCESS**

To apply for the Scholarship Program, you must complete and sign the *Scholarship Program Application Form*, and return the Application Form with the supporting documentation to the Tukwila Community Center. Please note that your supporting documentation will not be returned to you. If you require assistance completing the form, please contact the Tukwila Community Center and a staff member would be happy to assist you.

**The information provided on the Application Form is confidential and will only be used to determine eligibility.**

**Please allow up to 10 working days for review.**

NOTE: Review and approval of Scholarship Application **DOES NOT** register the individual into the program. Scholarship applications must be approved **prior** to registration.



# SCHOLARSHIP PROGRAM APPLICATION

*Please provide the following information. Incomplete applications will not be reviewed.*

HEAD OF HOUSEHOLD INFORMATION	
Name _____	
Street Address _____ City _____ Zip _____	
Day Phone (____) _____ Evening Phone (____) _____	

PARTICIPANT(S) INFORMATION	
<b>1</b>	Name _____ Date of birth ____/____/____ School _____ Grade (15-16 school yr.) _____ Program _____ Program Dates _____
<b>2</b>	Name _____ Date of birth ____/____/____ School _____ Grade (14-15 school yr.) _____ Program _____ Program Dates _____

*For additional participants, please use another form and attach to this application.*

ATTACHMENTS & SUPPORTING DOCUMENTATION
The following documents <u>must</u> be submitted with your application. <b><i>Incomplete applications will not be reviewed.</i></b> <ul style="list-style-type: none"> <li>○ Program Registration Form(s) for the program that you are applying for</li> <li>○ Verification of Tukwila Residency or enrollment at a Tukwila School District school (if not a Tukwila resident)</li> <li>○ Most recent Federal Income Tax Return Form, <b>AND/OR</b></li> <li>○ Copy of last two (2) most recent pay stubs, <b>AND/OR</b></li> <li>○ Copy of statements that verify the income listed in worksheet below</li> </ul>

INCOME WORKSHEET (gross per month)	
Complete this worksheet to determine your monthly household income. Monthly income is calculated for all members of the household and includes wages, salary, social security, public assistance, childcare assistance, pension, unemployment, insurance, child/spouse support, retirement, and any other sources of income.	
Paycheck	
Unemployment	
Social Security	
Child/Spouse Support	
DSHS (Welfare, WIC, etc.)	
Other (list _____)	
<b>TOTAL</b>	

Number of people in household \_\_\_\_\_

*I certify that the above information is true and correct and that all income is reported. I understand that this information is being given for the receipt of fee reduction/scholarship; that City of Tukwila officials may verify the information on the application; and that deliberate misrepresentation of the information may subject me to prosecution under the applicable State and Federal laws.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

OFFICE USE ONLY	
Date Received: _____ Received by: _____	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied    Amt Granted: \$ _____    Staff: _____    Date Notification Sent: _____	
Comments:	