

APPLICATION FOR STINGRAYS SWIM TEAM SCHOLARSHIPS FOR USE BY CHARLEVOIX POOL FOR SWIM TEAM SCHOLARSHIP ELIGIBILITY

Complete one application per household. Please use a pen (not a pencil).

STEP 1 First Name: _____ Last Name: _____ Phone #: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Child's Name: _____ Birthdate: ___/___/___ ~ Child's Name: _____ Birthdate: ___/___/___

Child's Name: _____ Birthdate: ___/___/___ ~ Child's Name: _____ Birthdate: ___/___/___

My child currently qualifies for free and reduced Lunch: ___ YES ___ NO ___ I Don't Know

STEP 2 Fill this in if you do not know if your child qualifies for free or reduced lunch. Otherwise, skip to STEP #3

A. Child's Income

Sometimes children in the household earn or receive income. Please include the TOTAL income received by all Household Children listed in STEP 1 here.

Child's Income				How Often?			
\$				Weekly	Bi-Weekly	2x Month	Monthly
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

B. All Adult Household Members (including yourself)

List all Household Members not listed in STEP 1 (including yourself) even if they do not receive income. For each Household Member listed, if they do receive income, report total gross income (before taxes) for each source in whole dollars (no cents) only. If they do not receive income from any source, write '0'. If you enter '0' or leave any fields blank, you are certifying (promising) that there is no income to report.

Name of Adult Household Members (First and Last)	Earnings from Work				Public Assistance / Child Support / Alimony				Pensions / Retirement / All Other Income															
	How Often?				How Often?				How Often?															
	\$				Weekly	Bi-Weekly	2x Month	Monthly	\$				Weekly	Bi-Weekly	2x Month	Monthly	\$				Weekly	Bi-Weekly	2x Month	Monthly
	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	\$				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Total Monthly Income	\$				
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STEP 3 Certification and adult signature.

"I certify (promise) that all information on this application is true, and that all income is reported. I understand that this information is given in connection with the receipt of scholarship funds, and that we may verify the information. I am aware that if I purposely give false information, I may lose the scholarship, and I may be prosecuted under applicable State and Federal laws."

Parent/ guardian printed name: _____ Signature _____ Today's date _____

STEP 4 TAKE FORM TO THE CHARLEVOIX AREA COMMUNITY POOL for Stingrays Swim Team eligibility

Example Sources of Income for Children		Example Sources of Income for Adults		
Sources of Child's Income	Example(s)	Earnings from Work	Public Assistance / Alimony / Child Support	Pensions / Retirement / Other Income
<ul style="list-style-type: none"> - Earnings from work - Social Security <ul style="list-style-type: none"> - Disability Payments - Survivor's Benefits 	<ul style="list-style-type: none"> - A child has a regular full or part-time job where they earn a salary or wages - A child is blind or disabled and receives Social Security benefits - A Parent is disabled, retired, or deceased, and their child receives Social Security benefits 	<ul style="list-style-type: none"> - Salary, wages, cash bonuses - Net income from self-employment (farm or business) <p>If you are in the U.S. Military:</p> <ul style="list-style-type: none"> - Basic pay and cash bonuses (do NOT include combat pay FSSA or privatized housing allowances - Allowances for off-base housing, food, & clothing 	<ul style="list-style-type: none"> - Unemployment benefits - Worker's compensation - Supplemental Security Income (SSI) <p>Cash assistance from State or local government</p> <ul style="list-style-type: none"> - Alimony payments - Child support payments - Veteran's benefits - Strike benefits 	<ul style="list-style-type: none"> - Social Security (Including railroad retirement and black lung benefits) - Private pensions or disability benefits - Regular income from trusts or estates - Annuities - Investment income - Earned interest - Rental income - Regular cash payments from outside household
<ul style="list-style-type: none"> - Income from person outside the household 	<ul style="list-style-type: none"> - A friend or extended family member regularly gives a child spending money 			
<ul style="list-style-type: none"> - Income from any other source 	<ul style="list-style-type: none"> - A child receives regular income from a private pension fund, annuity, or trust 			

STINGRAYS SWIM TEAM INFORMATION from the Charlevoix Area Community Pool

A limited number of group swim lesson scholarships are available to students while funds last. Scholarships will be awarded to students who qualify for free or reduced lunch according to Federal guidelines. Please ask us for information if you are not sure your child qualifies for a scholarship.

Parents or Guardians of students applying for scholarships will need to fill out this form and bring it to the pool for review. If scholarships are still available, and the student qualifies for a scholarship, the parent or guardian will be notified by phone. The pool will not be able to provide any transportation to or from the pool. These scholarships are awarded on a first come/first served basis so we recommend getting your form in early so the pool staff can determine the child's eligibility. We want to thank the Charlevoix Elks Club and private donors for funding all or part of these scholarships. If you have any questions, please contact pool manager Kathy Klimas at 231-547-0982. The schedule and information for Stingrays swim team is located on our website at www.CharlevoixPool.org. BRING FORMS TO THE POOL. You can't register for Stingrays Swim Team on the website.

POOL USE ONLY: Reviewed by _____ Date _____ Approved for Group Swim Lesson Program and Pool Use Vouchers ____ YES ____ NO