



## Scholarship Assistance Application

Oregon City Parks and Recreation recognizes that some of the residents of Oregon City require financial assistance to attend certain recreational activities. A limited number of scholarships are available for those who qualify. The information requested below is confidential and is necessary to help determine the degree of need for each applicant. All information must be filled out completely or the application will be returned unaccepted. To qualify you must be an Oregon City resident and must meet our income eligibility requirements.

Scholarships are processed prior to each quarterly registration period. Please submit your application at least one week before the registration date to ensure adequate processing time and be sure to include any required documentation. You will be notified by email or phone of your qualifying status.

If you are unable to access this form online and submit it via email, you may request a physical copy.

When completed, mail in to or drop off at:

## Oregon City Swimming Pool

1211 Jackson Street

Oregon City, OR 97045

Main Contact: (to be completed by parent/guardian of applicants)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ Oregon City, OR 97045

Email Address: \_\_\_\_\_

Employed by: \_\_\_\_\_

### Secondary Contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employed by: \_\_\_\_\_

TOTAL HOUSEHOLD YEARLY GROSS INCOME (include child support if applicable): \_\_\_\_\_

Number of people (adults & children) in the household supported by this income: \_\_\_\_\_

List each person (child) applying for a scholarship and which program is requested:



# OREGON CITY

Eligibility documentation is required. Check any public assistance programs in which you currently participate. Please submit a copy of a current award letters:

- Free/Reduced Lunch Benefit Letter from Oregon City School District
- TANF (Temporary Assistance for Needy Families) Benefit Letter
- Oregon Health Plan Membership
- Other (please list): \_\_\_\_\_

If you do not participate in any government assistance programs, you will need to provide proof of income. Please check all that apply to the household and attach documentation:

- Payroll stubs (last two months)
- Child Support / Alimony agreement
- Social Security / disability / pension benefits letter
- Unemployment Weekly Wage Benefit letter

I understand that being awarded a scholarship does not guarantee availability of desired activities.

I understand that scholarship credits issued are for program or activity use only and will not be available as a cash refund.

I certify that all information provided on this form is accurate and that all of my income is reported. I understand the deliberate misrepresentation may result in denial of eligibility for OCP&R scholarships.

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

<b>OFFICE USE ONLY</b>			
Date Received: _____	<input type="checkbox"/> Approved _____ % <input type="checkbox"/> Swim Lessons <input type="checkbox"/> Camps		
Staff Initials: _____	Lesson \$ Awarded: _____ Camp \$ Awarded: _____		
Date Processed: _____	<input type="checkbox"/> Not Approved		
Staff Initials: _____	<input type="checkbox"/> Non-Resident <input type="checkbox"/> Over income <input type="checkbox"/> Exceeds yearly maximum		