



Scholarship Application

Please fill out this form completely, so your application can be processed in a timely manner. The Club will notify you regarding your level of scholarship assistance. Youth will be allowed to begin participation in programming when this form has been processed AND any fees owed are paid or payment plans are made. If you wish to start the program before this application is processed, you will be responsible for your child(ren)'s program fee in full.

Step 1: Names of Children Who Will be Attending Summer Program:

(use first and last names)

1. _____
2. _____
3. _____
4. _____

Step 2: Mother's Information

Mother's name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Are you a single parent household? Yes No

Employer: _____ Address: _____

Employer Phone: _____ E-mail: _____

Gross Monthly Income: _____

Step 3: Other Sources of Monthly Income for Mother

Child Support: _____

SSI: _____

Food Stamps: _____

Disability: _____

Other: _____

Do you receive childcare assistance? Yes No



Step 4: Father's Information

Father's name: _____
Address: _____
Home Phone: _____ Cell Phone: _____
Are you a single parent household? Yes No
Employer: _____ Address: _____
Employer Phone: _____ E-mail: _____
Gross Monthly Income: _____

Step 5: Other Sources of Monthly Income for Father

Child Support: _____
SSI: _____
Food Stamps: _____
Disability: _____
Other: _____
Do you receive childcare assistance? Yes No

Step 6: Request for Documentation

- Helpful supporting documentation:
- Most recent Tax Return **OR** work pay stubs for each parent
 - Proof of any state or federal government aid, (ie, food stamps, welfare, etc.)
 - All other sources of income as reported in Step 3 and Step 5

Inability to pay will not be a barrier. All circumstances will be considered and steps will be taken to ensure children's program participation. Please feel free to add any special circumstances that may be helpful to club personnel in understanding your family needs.

Step 8: Parent / Guardian Signatures

I certify that all of the above information is true, accurate, and complete to the best of my knowledge and give permission to the Boys & Girls Club of Fond du Lac to verify all of the above information. I am also aware that it is my responsibility to notify the Boys & Girls Club of Fond du Lac of any change in information in this application such as income, address, or other matters that might affect my eligibility for financial assistance, or my scholarship may be terminated.

Parent/Guardian Signature: _____ Date: _____