

2024 Youth Scholarship Application

PLEASE READ - General Info

Programs and activities offered by HRC are supported in large part by user fees. Families meeting income guidelines may be eligible for scholarship assistance for their children.

It will take 5-7 business days to process your application. Notice of approval or decline will be received via mail.

*Scholarship applications will not be processed without all required information.

***Income is calculated on GROSS income (before deductions from taxes, insurance premiums, dues, employee's social security taxes and other employee deductions.) Income includes gross income from wages, salary, commissions, self-employment, social security, pension, retirement, public assistance, alimony, child support, strike benefits, unemployment, workers compensation and regular contributions from people not living in the same household.**

*To receive a scholarship, at least one participant in the household must be age 17 or younger, or be 18 and enrolled in the 12th grade.

*Certain activities are excluded from scholarships including but not limited to: private lessons of any kind, specialty camps, special events, etc.

*Completed scholarship paperwork must be received in our office one week prior to enrolling in any activities.

*Hays Recreation Commission may at anytime require applicant to provide proof of income, included but not limited to: pay stubs, W2's, income tax returns, DSS form, SSI form, Social Security statements, or Unemployment statements.

*Scholarship approval is good from the date approved till December 31 of that year. You must reapply every January 1st.

*Scholarship applications will remain confidential with the Hays Recreation Commission.

*Failure to attend an activity paid for by the scholarship may result in loss of future financial assistance.

*Foster Children or children that are wards of the court may automatically qualify, speak to the office manager.

*Scholarships may not be used in conjunction with online registration. All Scholarships must be used at our office at 1105 Canterbury Drive. For more information call 785-623-2650.

FOR HRC USE ONLY – DO NOT WRITE BELOW THIS LINE

Approved: _____ Denied: _____ Reason: _____

Put in RecTrac: _____ Letter Sent: _____ Staff: _____ Date: _____



HAYS RECREATION COMMISSION

1105 Canterbury Drive - Hays KS 67601

785-623-2650 - www.haysrec.org

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It will take 5-7 business days to process your application.

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INSTRUCTIONS: To apply for a scholarship for reduced activity fees for your child, carefully complete, sign, and return this application to the HRC office. If you need help with this form, please contact the HRC office. **Your application cannot be approved if it is incomplete.**

YOU MUST HAVE THIS FORM FILLED OUT AND APPROVED PRIOR TO ENROLLING IN ANY ACTIVITIES!

LIST NAME(S), AGE(S), and GRADE(S) OF EVERYONE LIVING IN YOUR HOUSEHOLD. LIST ALL INCOME RECEIVED LAST MONTH (before taxes and other deductions). If you have no income write how you support yourself and family (i.e. student loans, grants etc.) *If a child is a foster child please write FOSTER next to their name.*

Please check a box:

E-Mail my approval/denial letter (put email below!)

Mail my approval/denial letter (takes longer)

HOUSEHOLD INFORMATION: Complete your Household information.

Mother/Primary/Legal Guardian Name:	Father/Secondary/Additional Legal Guardian Name:
Household Address, City, State, Zip:	Primary or BEST Phone # for Household:
Mother/Primary/Legal Guardian Employer Name & Phone #:	Father/Secondary/Additional Legal Guardian Employer Name & Phone #:
Mother/Primary/Legal Guardian Cell Phone #:	Father/Secondary/Additional Legal Guardian Cell Phone #:
Mother/Primary/Legal Guardian Email Address:	Father/Secondary/Additional Legal Guardian Email Address:

FAMILY MEMBERS: List everyone who lives at the above address, **INCLUDE THOSE LISTED ABOVE!**

FIRST NAME	LAST NAME	DOB MM/DD/YY	GENDER M/F	GRADE K-12th	ALL INCOME BEFORE TAXES FOR THE PAST MONTH (see FRONT for list)
1)					
2)					
3)					
4)					
5)					
6)					

Total Household Members: _____

Total Household Income: _____

SIGNATURE: I certify that all of the above information is true and correct and that all income is reported. I understand that HRC officials may verify the information on the application, and deliberate misrepresentation of the information may subject me to prosecution under applicable State and Federal laws. An adult must sign the application before it can be approved.

Signature of Adult Family Member

Date

WEB