



# 2024-2025 School Year Youth Recreation Scholarship Application

## Gardner Parks and Recreation Confidential Financial Assistance Form

The following information is confidential and will only be used for the determination of eligibility and amount of assistance to be provided by the Gardner Parks and Recreation Department for the child listed below.

### Applicant Information

Child Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #  
\_\_\_\_\_  
City State ZIP Code

Parent/Guardian Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Total family members in household: \_\_\_\_\_

### Eligibility Requirements

Does the child attend a Gardner/Edgerton school? Yes No

*\*If yes, please list school name:* \_\_\_\_\_

Please indicate which lunch reduction you receive (circle one): **Reduced** or **Free** *\*Attach approval letter from district to this form.*

*\*If no, please provide total yearly income for each adult member of the family. \$* \_\_\_\_\_

*\*If using income as eligibility, please attach tax form 1040 for every adult member of the family to this form.*

Is the child you are requesting assistance for a foster child in your care? \_\_\_\_\_

Does your family receive benefits through AFDC or Social Services (food stamps)? \_\_\_\_\_

*\*If yes, please attached Notice of Decision Form from Social Services to this form.*

### Hardship Assistance

If you do not meet the eligibility requirements listed above, please explain why you are asking for financial assistance:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I do hereby acknowledge that the information I have provided above is true and accurate and that this information is subject to verification by Gardner Parks and Recreation. I also acknowledge that the submission of false or inaccurate information could lead to my removal from the scholarship process.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_