

TOWN OF GATES RECREATION & PARKS DEPARTMENT  
**SCHOLARSHIP APPLICATION**

Mother (Guardian) Name: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Father Name: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Marital Status: \_\_\_\_\_

1. Are you or a member of the household receiving:

\_\_\_\_\_ Unemployment                      \_\_\_\_\_ Social Security                      \_\_\_\_\_ AFDC

\_\_\_\_\_ Welfare                                      \_\_\_\_\_ Food stamps                                      \_\_\_\_\_ ADC

Case Number \_\_\_\_\_

(attach copy of benefits card from Dept. of Social Services))

2. Are you or your spouse currently employed?

Self: \_\_\_\_\_ yes    \_\_\_\_\_ no                      Spouse: \_\_\_\_\_ yes    \_\_\_\_\_ no

Name of Employer \_\_\_\_\_ Work phone \_\_\_\_\_

# of hours per week \_\_\_\_\_

Gross household income: \_\_\_\_\_ (attach copy of last year's federal income tax return if you have not attached benefits card)

Number of persons in household: \_\_\_\_\_ (all related or non related persons living in house who share income and expenses)

3. Is participant a foster child? yes \_\_\_\_\_ no \_\_\_\_\_

4. Scholarship is for:

**Child #1**

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

**Child #2**

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Over Please

**Child #3**

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_ Zip \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_

**Child #4**

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_ Zip \_\_\_\_\_  
School \_\_\_\_\_ Grade \_\_\_\_\_

**5. Programs applying for scholarship**

Child's Name	Program #	Program Name	Program Fee	Requested Scholarship

I state that the above information is correct.

Signed \_\_\_\_\_ Date \_\_\_\_\_

<u>For Office Use Only</u>	
Application Received on _____	Reviewed by _____
Full Scholarship for \$ _____	Partial Scholarship for \$ _____
Application Denied because _____	
_____	