

**Purpose:** - To allow every City of Mt. Pleasant resident the opportunity to participate in recreation activities regardless of household financial conditions. The Recreation Scholarship program was developed to facilitate opportunities for individuals and families with demonstrated financial needs.

**Who Qualifies?** – Any City of Mt. Pleasant resident, age 17 and under, who meets the qualification standards listed below in Table 1, and whose parent/guardian submits the Scholarship Application along with the required documentation.

Scholarships are limited to Recreation Department programs and do not include programs run by outside entities. A separate scholarship application must be completed for the PEAK Program. Applicants will be notified of scholarship approval status.

**How to Apply** – Complete the Scholarship Application form, which must be signed by a parent/guardian of the named youth applicant. One of the following pieces of documentation must accompany the application form:

- Approved Reduced Lunch Program Form;
- Pay Stub;
- W-2 Form;
- Tax Return including Schedule C;
- Social Security and/or Unemployment Statements.

Total family annual income must include the following before deductions for taxes:

- Monetary compensation for services, including wages, salary, commissions for fees;
- Net income from self-employment;
- Social Security;
- Public assistance or welfare payments;
- Alimony or child support payments;
- Regular contributions from persons not living in the household;
- Other cash income.

### Other Important Information

- Scholarship amounts are based on total family size and total family annual income level (see Table 1).
- Completing a Scholarship Application DOES NOT register your child. Please complete the required registration form.
- All participants are expected to pay the scholarship rate advertised.
- Scholarships will be provided on a first-come, space-available basis.

<b>Table 1</b>	
	<i>Based on 2021/22 Free and Reduced Lunch Program Requirements</i>
Total Family Size	Total Annual Family Income*
Scholarship Eligibility	
2	\$ 32,227
3	\$40,626
4	\$49,025
5	\$57,424
6	\$65,823
7	\$74,222
8	\$82,621
<i>For each additional family member, add:</i>	<i>+\$8,399</i>
<i>*Total family annual income from all sources before deductions for taxes, insurance premiums, bonds, and other employee deductions.</i>	

**Confidentiality** – Mt. Pleasant Parks and Recreation will only use application information to determine scholarship status. Personal finances will not be discussed outside of the department. Coaches, instructors, or program leaders will not be informed of a participant’s financial or scholarship status.

# Scholarship Application Form



Parks & Recreation

## To be completed by a parent or guardian

*please print neatly or type*

**Please return to:** Mt. Pleasant Parks and Recreation  
320 W. Broadway  
Mount Pleasant, MI 48858  
parks-rec@mt-pleasant.org

**Parent/Guardian:** \_\_\_\_\_

**Address:** \_\_\_\_\_ *Mt Pleasant MI 48858*

**Home Telephone:** \_\_\_\_\_ **Work Telephone:** \_\_\_\_\_

**Number of family members residing at above address:** \_\_\_\_\_

**Do you currently qualify for the Free/Reduced Lunch Program?** **Yes** **No**

List family members applying for scholarships below (age 17 and under):			Joint Custody	
Child's Full Name	Age	School Attending	Yes	No

**Do you receive financial assistance from any of the following?** (check all that apply)

**Department of Human Services**

**Social Security**

**Academic Scholarship**

**Child Support**

**Other** (Explain source.) \_\_\_\_\_

**Name of Case Worker:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Are you employed?** **No** **Yes** **If yes, who is your employer?** \_\_\_\_\_

**Total Family Income** (including wages of all working members, welfare payments, pension, social security, scholarships, and regular contributions from person not living in household). Supportive documentation to substantiate income shall include one of the following: Approved Free and Reduced Lunch Program Form, W-2 Form, DHS Form, Social Security and/or Unemployment Annual Statements. \$\_\_\_\_ per month. \$\_\_\_\_ per year

I, \_\_\_\_\_ (name of applicant), give permission to authorize Mt. Pleasant Parks and Recreation officials to verify information on this application. I also understand that deliberate misrepresentation of information subjects the applicant to being disqualified for scholarship consideration. I hereby certify that all of the above information is true and correct to the best of my knowledge and belief.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### FOR OFFICE USE ONLY

Date Approved \_\_\_\_\_ Approved By \_\_\_\_\_ Application Denied \_\_\_\_\_

Level Approved \_\_\_\_\_% Max. Amount Per Person Per Year \_\_\_\_\_ Max. Amount Per Household Per Year \_\_\_\_\_

(Y:\PRC2\Scholarships\ScholarshipApplication)