



SCHOLARSHIP PROGRAM GUIDELINES



All scholarships remain in effect for one calendar year from January 1-December 31.



A maximum of a \$500 credit is granted per individual per year.



Scholarships may be revoked at any time due to lack of funding, income changes or applicant fraud.



Food stamps and/or housing assistance do not need to be verified.



All Adult household applicants that will be recipients of financial aid must provide a government issued photo ID.



Proof of City of Reno residency is required (i.e., current driver's license, real estate tax bill, and voter registration card, or monthly bill proving current address is acceptable). An exception is for youth before and after school programs and full day camps.



30 days of income verification required. Wages may be verified with pay stubs. If you have just started work or have not been employed for 30 days, a letter from your employer with the date you started employment, the average hours worked per week and the rate of pay per hour will be required. The information on the letter must also include your employer's phone number and address. Other income such as social security, pensions and retirement accounts must be submitted and verified with appropriate documentation. All sources of income are required on the application.

The City of Reno Scholarship Program provides fee assistance in order to remove a financial barrier to recreation. Our recreational opportunities provide exposure to positive experiences for a healthier quality of life. Upon approval, individuals will receive a credit to be used toward programs and memberships.

City of Reno Scholarships are awarded at 20%, 40% and 60% of the program cost. The level of the scholarship is determined by the household income according to the sliding scale as indicated by the State of Nevada Subsidy Programs Household Size and Monthly Income Chart.

To complete the approval process you need to submit verification of gross income for the 30 day period prior to the date the application is signed. A complete application can take up to 10 days to process once received at the Administration Office.



SCHOLARSHIP APPLICATION

Please print. This is a two sided form; both sides must be filled out completely. Please do not leave any section blank. If section does not apply, please enter "n/a". To be considered for scholarship assistance, you **MUST** attach proof of ALL income, school/training program enrollment and other income/public assistance for the past 30 days. Proof of Reno residency is required (i.e. current drivers

license, real estate tax bill, voter registration card, or monthly utility bill with current address is acceptable). An exception is for youth before and after school program and full day camps. All Adult household applicants that will be recipients of financial aid must provide a government issued photo ID. Please call our office if you have any questions. Staff is available to assist.

Approved scholarships are effective for the calendar year, January 1 – December 31.

SCHOLARSHIP REQUESTS WILL NOT BE PROCESSED WITHOUT THE FOLLOWING INFORMATION.
Please allow 10 business days for processing.

Program Requested (Be Specific): _____

Applicant Name: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____

Home Address (Physical): _____

City: _____ State: _____ Zip: _____

List all ADULTS living at this address (including applicant) and attach proof of income: This includes employment, self-employment and odd jobs. If adult has not been employed within the last 30 days enter "none".

Applicant Name	Relationship	Gender	Date of Birth

Employer Name and Phone

Applicant Name	Relationship	Gender	Date of Birth

Employer Name and Phone

Applicant Name	Relationship	Gender	Date of Birth

Employer Name and Phone



SCHOLARSHIP APPLICATION

OTHER HOUSEHOLD INCOME: All income received in the last 30 days must be listed and verified by documentation.

- | | | | |
|---------------------------|-------------------------|----------------------------------|--------------------------|
| 1. Alimony/Child Support | 8. Interest | 15. Royalties | 20. TANF |
| 2. Contributions/Gifts | 9. Loans | 16. Social Security Disability | 21. Temporary Disability |
| 3. Dividends | 10. Lump Sum Payments | 17. Social Security Retirement | 22. Tips |
| 4. Educational Assistance | 11. Military Allotments | 18. Social Security Survivors | 23. Unemployment |
| 5. Food Stamps | 12. Pell Grants | 19. Supplemental Security Income | 24. Veterans' Benefits |
| 6. Foster Care Payments | 13. Pensions/Trust | | 25. Winnings |
| 7. Insurance Settlements | 14. Railroad Retirement | | 26. Worker's Comp |

Other: _____

Income Type #	Amount	How often is the income received?	Who receives the income
<i>Example: 05</i>	<i>\$250.00</i>	<i>Monthly</i>	<i>Family</i>

Full Time Students need to submit by Semester/Quarter/Class Period:

Copy of Class Schedule

Copy of Sources of Income: Letter from private party, gifts/support, grants or student loans

Child Name	Do both parents reside in the home?		Do you receive Child Support?*		If so, how often?	Amount of Child Support	Date of Birth	Is child male or female		Relationship to Applicant
	Yes	No	Yes	No				M	F	
	Yes	No	Yes	No				M	F	
	Yes	No	Yes	No				M	F	
	Yes	No	Yes	No				M	F	
	Yes	No	Yes	No				M	F	

AUTHORIZATION / RESPONSIBILITY: Consent is granted by this form to disclose or release information that is protected by the Privacy Act to appropriate Federal, State and Local agencies. This authorization includes, and is not limited to, the above statistical, income, employment, and educational information. I also understand that deliberate misrepresentation of information subjects the applicant to being disqualified for scholarship consideration. I hereby certify that all the above information is true and correct to the best of my knowledge and belief.

Applicant Signature: _____ Date: _____

