



**BOYS & GIRLS CLUB
OF PAWTUCKET**

Sharks Swim Team
Scholarship Application 2011-2012

Application deadline is Friday, September 30, 2011. Recipients will be notified the week of October 2, 2011. Priority is given to residents of Pawtucket.

Child's Name: _____ Age: _____

Parent/Guardian's Name: _____ Phone #: (____) ____ - _____

Address: _____ City: _____ State: _____ Zip: _____

Household Income*:

- Under \$46,200
- \$46,201-\$51,950
- \$51,951-\$57,700
- \$57,701-\$62,350
- \$62,351-\$66,950
- \$66,951-\$71,550
- \$71,551-\$76,200

PLEASE ATTACH A COPY OF ONE OF THE FOLLOWING FORMS OF PROOF OF INCOME FOR THIS APPLICATION:

- 2010 Federal Income Tax Return; **OR**
- Paycheck stubs with year-to-date earnings; **OR**
- Unemployment Check with year-to-date earnings; **OR**
- State Assistance Check with year-to-date earnings.

Number of persons in household: _____

* Please see the reverse side for eligibility requirements.

Do you qualify based on the income guidelines on the reverse: Yes No

This scholarship covers part of the cost of participation on the swim team. You are responsible for paying the \$75.00 for the first child, \$50.00 for each additional child, not covered by this scholarship in order for your child to participate on the Sharks Swim Team.

I understand that my application cannot be processed until all the required areas are completed and the required proof of income is attached. I also understand that the Boys & Girls Club of Pawtucket will notify me regarding acceptance of my application. I understand there is a \$75.00 for the first child (\$50 for each additional sibling receiving a scholarship) non-refundable co-pay that must be paid before my child can participate on the swim team unless an alternate payment arrangement has been made. I attest that the information on this form is accurate to the best of my ability and the attached proof of income represents the income from all members of my household.

Signature: _____ Date: _____

For Office Use Only

Membership Current & Verified: Yes No

Application Packet Complete: Yes No

Received by: _____

Meets Income Guidelines: Yes No

Awarded: Yes No

Co-Pay Paid/Payment Plan Arranged: Yes No

Approved by: _____

Scholarship Income Eligibility Requirements

1. Please find the number of people in your household.
2. If your combined household income is less than that listed next to the number of people in your household your income qualifies you for this scholarship.

Your income qualifies for this scholarship if:

You have the following number of people in your household:	And you make less than:
2	\$46,200
3	\$51,950
4	\$57,700
5	\$62,350
6	\$66,950
7	\$71,550
8	\$76,200