

# Scholarships FOR KIDS

GRAND FORKS  
PARK DISTRICT

 **CHOICE**  
HEALTH & FITNESS

 **KING'S WALK**  
ARNOLD PALMER SIGNATURE COURSE

 **LINCOLN**  
GOLF COURSE  
EST. 1909

 **Grand Forks**  
Parks & Recreation  
FOUNDATION

## PROGRAM SCHOLARSHIP APPLICATION

### STEP 1: Read our Scholarship Policy

The Grand Forks Park District strives to provide access to programs and facilities that promote a healthy and enjoyable lifestyle to all Grand Forks citizens, regardless of income level. In order to achieve this goal, the Grand Forks Park District offers youth program scholarships to those in need of financial assistance.

**What does a Youth Scholarship cover?** 50% of the cost of: (1) pool pass **AND** (1) program fee per child, per season

**Am I eligible?** Eligibility will follow the federal lunch assistance program guidelines for Grand Forks residents.

**How do I request a Scholarship?** Submit a completed application along with the correlating program registration form(s) to the Park District Main Office (1060 47th Ave. S., Grand Forks, ND 58201) prior to the registration deadline.

### STEP 2: Answer 3 Questions

1. Are you a Grand Forks resident? YES  NO

2. Do you qualify for the reduced lunch program with the Grand Forks Public Schools? YES  NO

If you marked "YES" above, please list each child's school lunch ID: \_\_\_\_\_

If you marked "NO" above, please list any other information that would qualify you for a scholarship.  
\_\_\_\_\_

*Note: You may be asked to provide us with one of the following: (1) your most recent Federal Tax Return, (2) a SNAP "Review approved" letter, or (3) a TANF approval letter.*

3. Are you receiving assistance from another organization? (i.e. GF Foundation for Education, GF Social Services, GF Public Schools, Consumer Directions, Spin for Kids, Global Friends Coalition, NE Human Services, etc.) YES  NO

If you marked "YES" above, please list the organization as well as your contact/case worker's information:  
\_\_\_\_\_

### STEP 3: Fill Out the Form

CHILD'S NAME	BIRTHDATE	REQUESTED PROGRAM (1 PER CHILD)	POOL PASS?
_____	___/___/___	_____	<input type="checkbox"/>
_____	___/___/___	_____	<input type="checkbox"/>
_____	___/___/___	_____	<input type="checkbox"/>

#### PARENT / GUARDIAN INFORMATION

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

*By signing this application, I hereby authorize the Grand Forks Park District to verify with the sources referred to above. I affirm that the facts set forth in this application are true and complete. I understand that if I am approved for a scholarship, any false statements, omissions, or other misrepresentations made by me on this application may result in termination of the scholarship.*

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

### STEP 4: Staple Scholarship Application to Program Registration Forms and Hand in to Grand Forks Park District Main Office.

**OFFICE USE ONLY:** Approved by (Initial): \_\_\_\_\_ Date: \_\_\_\_\_

*It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form.*