



City of New Bedford
Parks, Recreation and Beaches
Kennedy Summer Day Scholarship Application



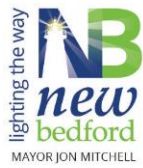
Dear Parent/Guardian,

Thank you for your interest in Kennedy Summer Day Program. The City of New Bedford Parks Recreation & Beaches Department has developed a scholarship program for New Bedford residents requesting financial assistance to participate in recreation department programming. New Bedford residents who meet the qualification and income requirements listed below, as well as contribute a minimum of \$115 towards each program fee, are eligible to apply. Please review the eligibility criteria and instructions below for participation. At this time, scholarships are available only to those between the ages of 5-14 years old and only for a two-week session.

Please complete and return the attached form with the required supporting documents. All portions of the application must be completed before review. Once your application is approved, you will be contacted with directions on how to register with the discounted rate.

Scholarship Guidelines:

1. Participants must pay a minimum of \$115 towards program fees, unless otherwise specified. Please submit scholarship application to PRB office before registering.
2. It is intended that this assistance be for the program noted only. Participants may be required to pay full or partial cost.
3. Assistance is limited to one to two sessions per application and for 2-week sessions only.
4. A maximum of \$280 funding per individual may be received within the fiscal year (July-June), unless otherwise specified.
5. Funds are limited, and subject to availability. Fee assistance is awarded on a first come, first serve basis.
6. Fee assistance is to be used for registration only, and does not include supplies, equipment, transportation fees or other costs.
7. Any past due accounts must be brought current before a fee assistance application is considered.
8. Decisions regarding assistance are final.
9. Applicants who falsify information or do not attend class regularly may be ineligible for fee assistance. If extenuating circumstances, please call the supervisor at 508-961-3015.



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Kennedy Summer Day **Scholarship Application**

Complete all pages of this form for each child you are requesting a scholarship. All information must be complete and accurate. Attach pay stubs for the last four weeks for all adults contributing to the family income. All appropriate documentation must be accompanied with this application to be considered for a scholarship.

PART 1: APPLICANT CONTACT INFORMATION

Child's Full Name: _____ DOB: ____ / ____ / ____ Grade Entering: _____

Family Information

Parent/Guardian 1

Full Name: _____

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

Telephone: (home) _____ (cell) _____

Email: _____

Place of Employment: _____

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

Parent/Guardian 2

Full Name: _____

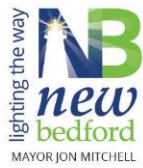
Address: _____ City: _____ State: _____ Zip: _____

Telephone: (home) _____ (cell) _____

Email: _____

Place of Employment: _____

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



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PART 2: APPLICANT ELIGIBILITY INFORMATION

Please provide:

1040 with 4 recent paystubs

OR

Proof of one of the following:

Nutrition Assistance Program (i.e. Free and Reduced Lunch, Snap, WIC, etc.)

Subsidized Housing (HUD, Section 8, LIHTC, etc.)

Medicare or Medicaid

If your family participates in another governmental financial aid program, please state here: _____

Income Information

Gross Monthly Family Income: \$ _____

Parent/Guardian Signature: _____ Date: _____

Income Eligibility Criteria

Income Limits set by the U.S. Department of Housing & Urban Development

Family of 2	Family of 3	Family of 4	Family of 5	Family of 6	Family of 7	Family of 8
Annual Income	Annual Income	Annual Income	Annual Income	Annual Income	Annual Income	Annual Income
0 – 53,850	0 – 60,600	0 – 67,300	0 – 72,700	0 – 78,100	0 – 83,500	0 – 88,850