

## North Highlands Recreation and Park District Scholarship Application FY 2024 - 2025

The North Highlands Recreation and Park District provides scholarship opportunities to participants (Youth 18 years and younger/ Seniors 55 years and older) with financial hardships to attend a program at 50% the cost of registration fee to **up to \$150.00 total discount for the fiscal year per participant**. To begin the process of obtaining a scholarship, please complete the application and provide proof of residency (Government-issued ID, check stub, utility bill, etc).

- Application must be fully completed and submitted at least ten (10) business days prior to the program start date.
   Incomplete applications and documents, and applications submitted less than ten (10) business days prior to the first day of the activity/program for which assistance is requested will be denied.
- Once the application has gone through the approval process, you will be notified of your application status. If approved, you
  will receive information on how to register and pay the remaining balance for the program.
- DO NOT enroll into the selected program <u>before</u> submitting the application if you wish for a discounted rate.

	PROGRAM	INFORMATION			
Program Name:					
Program Date(s):			Program Fee:		
	DARTICIDAN	TINEODMATION			
Participant's Full Name:	PARTICIPAN	T INFORMATION	l	Birthdate	<u> </u>
ranicipant's run Name.				Diftiluate	<b>;.</b>
School (If applicable):		Grade (If applicable):		Age:	
Home Address:	Apt/Suite #:	City:		State:	Zip Code:
Phone Number:		Email Address:			
Parent/Guardian's Full Name:	PARENT/GUARI	DIAN INFORMAT	ION		
raienvouaidian ST dii Name.	Check $[\sqrt{\ }]$ box if information below is the same as above:				
Home Address:	Apt/Suite #:	City:	<u> </u>	State:	Zip Code:
Phone Number:		Email Address:			
Please attach one of the supporting	ng documents that proves r	esidency (Governmer	nt-issued IC	), check stu	ub, utility bill, etc).
understand that to be eligible for thi	• • •		•		
District's boundaries or within the 950					
indergoing financial hardship. I unde submitted at least 10 days prior to th		•			
approved for the discounted rate. It is	· · ·				
	, , , ,		J		



## North Highlands Recreation and Park District Scholarship Application FY 2024 - 2025

FINANCIAL HARDSHIP						
Please briefly describe the natu	re of your financial hardship (attach second p	age if needed):				
	PREVIOUS SCHOLARSHIP EXPE	RIENCE				
Has the participant previously been awarded a scholarship from North Highlands Recreation and Park District within the current fiscal year (July 1, 2024 – June 30, 2025)?  Yes  No						
If yes, please answer the following sections:						
Name of the participant who received the scholarship:						
Program Name:						
Program Date(s):	Amount of \$ Awarded:					
·						
FOR DISTRICT USE ONLY						
Date Received: Program N	Program Fee:					
Requirement Checklist:  Application Proof of Residency Financial Hardship Participant Max						
Approval Checklist (Initial):						
Recreation Coordinator: Recreation Superintendent: Financial Account Manager:						
Scholarship Approved?  Yes No	If no, why?	If yes, scholarship	amount?			
Date Approved:	Date Scholarship was Emailed:	Date Registration	was Paid:			