

County Commissioners of Kent County, MD Department of Parks and Recreation



11041 Worton Road, PO Box 67, Worton, MD 21678 410-778-1948 * info@KentParksAndRec.org

Scholarship Application

By completing this application and providing supporting documents, you are requesting financial assistance for your child(ren) to participate in a Kent County Parks and Recreation program. There are two (2) types of scholarships that may be awarded: Partial Scholarship and Full Scholarship. If you are not granted a scholarship, you may elect to set up an installment payment plan as approved by the Recreation Supervisor or Program Coordinator. All information provided will remain confidential and will only be used for the purpose of determining scholarship eligibility.

Failure to provide ALL information required will result in your application being denied.

	Dogwined Info	mation			
	Required Infor				
Date of application:	<u>11casc 11mi (</u>	<u>Sicarry</u>			
Name of Child #1:		Program:			
Name of Child #2:	Program:				
Name of Child #3:		Program:			
	Program:				
Mailing Address:					
(Where mail is delivered) P.O. Box or Street Number	and Name	City	State Zip Code		
Number of Household Members:					
Total Adults	Total Children	Total Househ	old Size		
	Single Parent Household Two-Parent Household				
Total yearly household income (including total	ıl salary, child support	, alimony and/or government	assistance): \$		
Mother/Guardian:	ī	Fother/Cuardian			
Home Dhones		Father/Guardian: Home Phone:			
Work Phone:		Work Phone:			
Addross:		Address:			
Address.					
Employer:		Employer:			
Employer Phone:	I	Employer Phone:			
Total Annual Income:	7	Total Annual Income:			
<u>Check each section below</u> to indicate					
These documents will be immediately shredded once eligibility is determined.					
Attach copies of two (2) most recent consecutive pay stubs. Attach a copy of the <u>FIRST PAGE ONLY</u> (form 1040) of your most recent year's tax return.					
Failure to attach the above required do			year s tax return.		
		terhead) from agency which v	erifies vou receive assistance		
(please see reverse side for		, 0,	errice you receive assistance		
•		,			
By signing below, I certify that the information I have completed and attached to this form is true and correct. I understand that if I fail					
to complete all sections and submit all required d	ocuments, my application	n will be denied.			
Parent/Guardian Signature:		Ι	Date:		

Guidelines for Assistance

- 1. Individuals or families are eligible for a full scholarship for their child(ren) if they receive: public assistance, food stamps, medical assistance, Social Security or SSI as the sole or primary source of income, energy assistance, Section 8 or public housing. Verification (original letter on official letterhead) from the providing agency which verifies you receive assistance and that you are the parent or guardian of the child(ren) must be submitted with the application.
- 2. Generally, only partial scholarships are awarded for programs unrelated to child care (i.e., basketball, dance, gymnastics, etc.).
- 3. Scholarships are awarded based on ALL required information being provided and <u>verifiable supporting</u> documents submitted with this form.
- 4. Verification of all information will be at the discretion of Kent County Parks and Recreation.
- 5. Scholarships are not available for trips, special events, or certification courses.
- 6. Scholarships are awarded for children who <u>reside</u> and <u>attend school in Kent County</u>. This information will be verified with Kent County Public Schools or the school the child attends.
- 7. Scholarship awards expire December 31st of the current year, unless the program in which your child is enrolled continues into the following year, in which case the scholarship will expire at the end of the program. Scholarships for programs beginning on or after January 1st will require a new scholarship application, and supporting documentation. Kent County Parks and Recreation reserves the right to request updated financial documentation for multiple programs.
- 8. Confidentiality will be held with the utmost regard. All supporting documents will be immediately shredded once eligibility is determined. You will be required to submit financial information each time you apply for scholarship assistance.

	Sliding Scale of Scholarship Awards	3
Household Size	Annual Household Income	Annual Household Income
	Full Scholarship	Partial Scholarship
1	\$15, 678	\$22,311
2	\$21,112	\$30,044
3	\$26,546	\$37,777
4	\$31,980	\$45,510
5	\$37,414	\$53,243
6	\$42,848	\$60,976
7	\$48,282	\$68,709
8	\$53,716	\$76,442
Each additional family member	Add \$5,434	Add \$7,733

Source: Annual figures taken from Kent County Public Schools Meal Benefit Guide (7/2017-6/2018)

For KCPR Use Only						
	Denied	Staff Initials and Date:				
Notes:						
	Partial Scholarship Approved	Parent/Guardian responsible for: \$	Staff Initials and Date:			
Notes:						
	Full Scholarship Approved	Recreation Supervisor's Initials and Date:				
Notes:						