

Recreation Scholarship Guidelines

Program limited to use by qualifying Watsonville youth (18 years or younger).

In order to qualify, your household's annual gross income must fall within the income limits shown on this sheet. You must bring in a **copy of your 2017 1040 tax return or 540 form** to validate your income. Applications will be reviewed by the Parks and Community Services Department Customer Service staff upon submission.

If program funds run out during the year, it is possible the scholarship program will need to be halted, and assistance for all will be denied until funding is available. **Please note: there is a limit of one scholarship per child in a household.**

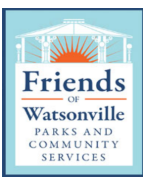
****If there is a special circumstance and/or additional information you will like us to consider to evaluate your eligibility, please attach a letter of explanation.**

If your income falls within these income limits, a full scholarship will be awarded to cover the full cost of the activity you've selected.

Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	\$ 15,171	\$ 1,265	\$ 633	\$ 584	\$ 292
2	20,449	1,705	853	787	394
3	25,727	2,144	1,072	990	495
4	31,005	2,584	1,292	1,193	597
5	36,283	3,024	1,512	1,396	698
6	41,561	3,464	1,732	1,599	800
7	46,839	3,904	1,952	1,802	901
8	52,117	4,344	2,172	2,005	1,003
For each additional family member, add:	\$ 5,278	\$ 440	\$ 220	\$ 203	\$ 102

If your income falls within these income limits, a partial scholarship will be awarded to cover 50% of the cost of the activity you've selected.

Household Size	Annual	Monthly	Twice Per Month	Every Two Weeks	Weekly
1	\$ 21,590	\$ 1,800	\$ 900	\$ 831	\$ 416
2	29,101	2,426	1,213	1,120	560
3	36,612	3,051	1,526	1,409	705
4	44,123	3,677	1,839	1,698	849
5	51,634	4,303	2,152	1,986	993
6	59,145	4,929	2,465	2,275	1,138
7	66,656	5,555	2,778	2,564	1,282
8	74,167	6,181	3,091	2,853	1,427
For each additional family member, add:	\$ 7,511	\$ 626	\$ 313	\$ 289	\$ 145



2018 SCHOLARSHIP APPLICATION

(Only residents of City of Watsonville are eligible)

Parent/Guardian Information:

Last Name	First Name	Home Phone		Work Phone
Street		City	Zip	Birth Date

Including yourself, how many persons make up your household? _____ Phone #: _____

Indicate the activity(ies) your child would like to participate in. Provide his/her name, relationship to you, gender, and birthdate.

Name of Participant(s) & Programs	Relationship to you	Gender	Birth Date

To be considered for a scholarship all applicants must bring: A copy of their 2017 **1040 Tax Return** or **540 Form** to verify income information.

Certification

I do hereby acknowledge that the information I have provided above is true and accurate and that this information is subject to verification by the agency providing funding for this project. I also acknowledge that the submission of false or inaccurate information could lead to my removal from the scholarship program for a designated time.

Signature

Date

For Office Use Only

Annual Gross Income	\$	Form used to Determine Income:	<input type="checkbox"/> 1040 Tax Form <input type="checkbox"/> W2 Other: _____
Amount of Scholarship Approved: \$			Scholarship Denied/ Reason:
Type:	Full <input type="checkbox"/>	Partial/ 50% <input type="checkbox"/>	Amount Paid by Applicant:
Application Approved/Reviewed by:			Date:

Please note: You can submit your scholarship applications at the Parks and Community Services Customer Service Center- 231 Union Street, Watsonville, Monday - Thursday, from 9am to 5pm. The Parks and Community Services Department customer service staff look forward to reviewing your scholarship application, registering you or your children in our exciting programs and answering any questions you may have. **Make sure to bring a copy of your 2017 1040 Tax Return or 540 Form. Otherwise your application will not be considered. Applications will be reviewed at the time they are submitted.**