



City of Albany Recreation and Community Services Recreational Youth Programs Scholarship Fund

With the goal of providing quality, fun, and safe childcare, classes, and camp programs to everyone, the city of Albany, with the support of donations, provides scholarships to low-income Albany residents.

The scholarship is offered to Albany residents. proof of residency and income is required for award consideration. Proof of residency may be provided in the form a bill or piece of mail. Scholarship availability and award amounts are dependent on funding, which is made possible entirely by donations.

All communications regarding this scholarship program are held in strict confidence.

Questions? Contact the Albany Recreation & community Services Department at (510)524-9283 or by email at Recinfo@albanyca.org

Complete applications can be submitted in-person or mailed to:

**City of Albany Recreation & Community Services
ATTN: Recreational youth programs scholarship fund
1249 Marin Ave.
Albany, CA 94706**

For office use only:

Received by: _____ Date: _____

RECREATIONAL YOUTH PROGRAMS SCHOLARSHIP FUND

Name of Applicant: _____

Address: _____ City: _____ Zip code: _____

Phone: _____ Email: _____

Household Family Member Listing:

(Only family members living within the same household should be listed)

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Please complete activity registration below:

Name of Participant	D.O.B.	Name of Activity	Dates	Fee

The following chart from the U.S. Department of Housing and Urban Development will be used as a guide to help determine award amount. This is only meant to be used as a guide, and does not indicate scholarship qualification.

Household Size (including adults and children)	Monthly	Annually
2	3,875	46,500
3	4,358	52,300
4	4,842	58,100
5	5,229	62,750
6	5,617	67,400
7	6,004	72,050
8	6,392	76,700

RECREATIONAL YOUTH PROGRAMS SCHOLARSHIP FUND

Please use the following to calculate your gross monthly income. Be sure to attach any proof of income, such as pay stubs, to this application. Applications without proof of income will not be accepted.

1. Wages or Salary	\$ _____
2. Child Support or Alimony	\$ _____
3. Temporary Assistance for Needy Families (TANF)	\$ _____
4. School Financial Assistance	\$ _____
5. Pensions and Annuities	\$ _____
6. Total Gross Monthly Income	\$ _____

Please read and initial the following statements:

____ Applicant certifies that the information included in this application packet is thorough and complete.

____ Applicant understands that if they are awarded a scholarship, and do not use it before the end of a season, that award is forfeited.

____ Applicant understands that a complete application packet must be submitted to be considered for an award.

____ Applicant understands that their family/household may only receive one scholarship award per activity guide.

____ Applicant understands that if income information is withheld, it will hinder ability to apply for a scholarship with the City of Albany in the future.

I have read the above policies regarding this scholarship award.

Print Name:

Signature:

Date:

For office use only:

Qualify for Scholarship Paperwork included Amount Awarded \$ _____

Notes: _____