

**Bensenville Park District
Financial Assistance Scholarship
Application Guidelines**

(1) Policy: The Bensenville Park District believes that all residents should have the opportunity to participate in recreational programs. The Park District will attempt to provide leisure opportunities for residents faced with financial hardship, or, in need of temporary assistance.

(2) Qualification for Scholarship: Documented proof of financial need and residency must be demonstrated to qualify for scholarship programs for Bensenville Park District residents. Items that will be considered when evaluating financial need include gross income, current participation in any government assistance, child support, food stamps, school lunch or subsidized housing programs, excessive medical bills, or other unusual and burdening financial circumstances, all of which require documentation to be included with this application. *If employed, you must provide a copy of your last four pay stubs. Please include employment and other information for both parents if it is a two-person household.* **Gross Income includes gross employment income, alimony, child support, food stamps, TANF, housing assistance and any government assistance.** (a) Photocopies of the above items must be attached to enclosed (b) Financial Assistance Scholarship Application Form in addition to a new (c) Household Information Form. Letters from service agencies will also be accepted as support.

(3) Procedure: Persons requesting scholarship must complete a Household Information Form and the Financial Assistance Application Form and submit it along with the above necessary documentation to the Superintendent of Recreation. Applications will be individually reviewed and evaluated. Applicants will be notified within 2 weeks of receiving the application if the application is approved.

(4) Limits on Scholarships: Scholarships will be limited to a maximum of 50% off the resident registration fee(s) for two (2) programs per session, per person. Scholarship awards will only be available to residents of the Bensenville Park District. Scholarships awards will be determined by need and availability of funds. Scholarships are not available for trips, contractual programs or White Pines.

(5) Application Guidelines: All information submitted is confidential and is not a matter of public record. All information on the application must be true and accurate. Scholarship funds are legally recoverable if paid and awarded on the basis of false information supplied by applicant. This will nullify your request and any further request for a scholarship. All requests for scholarships will be reviewed by the Superintendent of Recreation. **Applications must be submitted for each session individually and multiple sessions cannot be applied for with one application. Granting of scholarship does not ensure continued approval for succeeding sessions. Applications must be turned in two weeks prior to the start of the program.**

If you have any questions, don't hesitate to contact me. Thank you.

Submit to: Rory Joyce Superintendent of Recreation 1000 W. Wood St. Bensenville, IL 60106	rjoyce@bensenvilleparkdistrict.org Tel: (630) 766-7015, Ext. 2011 / Fax: (630) 766-9280
---	--

**Bensenville Park District
Financial Assistance Scholarship Application Form**

Name of Applicant: _____ Date: _____

***Note: Gross Income includes employment income, alimony, child support, food stamps, TANF, housing assistance and any government assistance. Complete documentation of all is required -see below**

New Applicant: ___ Past recipient: ___ (check one) Regardless, new documentation must be provided	
Parent/ Legal Guardian 1: (LIST ALL SOURCES OF INCOME)	
Gross Income: \$ _____ per _____ (amount and pay period length, such as annual, bi-weekly, etc.)	
Address: _____	
Home Phone: _____	Cell Phone: _____
E-mail Address: _____	
Parent/ Legal Guardian 2 (LIST ALL SOURCES OF INCOME):	
Income: \$ _____ per _____ (list amount and pay period length, such as annual, bi-weekly, etc.)	
Address: _____	
Home Phone: _____	Cell Phone: _____
E-mail Address: _____	

Total Family Household Income (before taxes): _____

Reason for Request: _____

Attached documentation [see (2) on previous page, include photocopies.

Program(s) for which you are seeking assistance (2 per person per session)

Participant Name: _____	Program Name: _____	Program Code: _____	Start Date: _____
Participant Name: _____	Program Name: _____	Program Code: _____	Start Date: _____
Participant Name: _____	Program Name: _____	Program Code: _____	Start Date: _____
Participant Name: _____	Program Name: _____	Program Code: _____	Start Date: _____
Participant Name: _____	Program Name: _____	Program Code: _____	Start Date: _____
Participant Name: _____	Program Name: _____	Program Code: _____	Start Date: _____

I certify that the information provided is true and accurate to the best of my knowledge. My signature below will permit the Bensenville Park District to verify information through local school districts or public agencies.

Signature: _____ Date: _____