

Student Recreation Scholarship

Name of Parent _____

Name(s) of children _____

Address _____

Phone Number _____ Evening Phone _____

Qualifications: To be eligible for the student recreation scholarship program, the student must also be enrolled in the free and reduced school lunch program. We will offer scholarships on a first come first serve basis.

Please complete the statement:

My child(ren) is/are eligible for the free/reduced school lunch program. Their names are:

Or, why do you feel that your child needs the student recreation scholarship program? (Example may be child needs social interaction.)

In signing this form I certify that information provided is true.

(Signed and dated)

These scholarships are made available by private donations made to the recreation department.