



2025-2026 APPLICATION

Applicant's Information

Youth Applicant's Full Name: _____ Grade: _____

Last

First

M.I.

School Name: _____ Cumulative GPA: _____

Parent/ Guardian Full Name: _____

Last

First

M.I.

Home Address: _____

Street Address

Apartment/ Unit #

City

State

Zip Code

Is your home address the same as your mailing address? Yes ___ No

Mailing Address: _____

Street Address

Apartment/ Unit #

City

State

Zip Code

Youth Applicant Phone: _____ Youth Applicant Email: _____

Parent/Guardian Phone: _____ Parent/Guardian Email: _____

Parent Preferred Language: English Spanish Parent Preferred Method of Contact: Text Email

Household

Monthly Household Gross Income \$ _____ Household Size: _____

Ages: 0-4 ___ 5-18 ___ 19-64 ___ 65+ ___

Household Expenses

Gas: \$ _____ Light: \$ _____ Water: \$ _____ Phone: \$ _____ Rent/ Mortgage: \$ _____

Medical Expenses (\$35) \$ _____ Healthcare: \$ _____ Childcare: \$ _____ Child Support: \$ _____

Property Taxes: \$ _____

Academic / Teacher Reference

Name: _____ Title/ Position: _____

Email: _____ Phone Number: _____

What is the relation to student?

School or Organization: _____

Extracurricular Activity

What single extracurricular activity would you like to apply for this scholarship to?

Name or Organization: _____

Organization Address: _____

Name of Main Contact: _____ Phone Number: _____

Email: _____

**Please be ensured that the information listed above is accurate and most up to date
Please attach organization W-9 for recurring payments**

List all fees associated with the activity listed on the previous page, their cost, due date, and schedule of payment in the table below			
FEE	COST	DUE DATE	SCHEDULE OF PAYMENT
<i>Ex: Registration</i>	<i>\$250</i>	<i>12/01/2025</i>	<i>One- time</i>
Total:			

Required Attachments

Attach the following documents to this application. Applications with missing attachments will delay the application process.

- ✓ **Most recent report card from school office**
- ✓ **Proof of household income** – Must be current (last 4 weeks) and for all household members earning income (Ex. Paychecks, Bank statements, unemployment benefits, Child support, Disability, Etc.)
- ✓ **Proof of participation – or plan to participate – in an extracurricular activity** (Ex. Activity flyer, registration receipt, etc.)

Disclaimer & Signature

By signing my name below, I certify that my answers are true and complete to the best of my knowledge and that I am aware of the requirements of the program and what is expected of me.

If this application leads to acceptance into the program, I understand that false or misleading information in my application may result in removal from the program.

Youth Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____