

SCHOLARSHIP ASSISTANCE APPLICATION FORM

The Midland Soccer Club recognizes that some families may not be able to afford the cost of soccer registration fees due to limited income. The Club has, therefore, established a Scholarship Fund for the purpose of helping to pay registration fees for those in need of such assistance.

Terms & Conditions:

1. Proof of annual household income is required by attaching one of the following: A copy of your most recent Federal 1040 tax form (front & back), and/or an eligibility letter stating benefits from the Family Independence Program, Social Security or other program. Please make sure to include all sources of income, including wages, government or community assistance, child support, etc.
 2. Scholarship funds are limited and, therefore, eligibility does not guarantee any dollar amount of funding or even of funding itself. Depending on annual household income, household size, and/or special circumstances, scholarships may cover from 25% - 90% of the registration fee. Any balance due by the financial aid recipient, must be paid in full before the child is placed on a team.
 3. A Scholarship Committee is responsible for allocating funds in a fair and balanced way that serves the largest possible number of eligible applicants. Limits may be placed on dollar amounts granted per family.
 4. Complete scholarship application, including proof of income for all those living in your household, should be dropped off or mailed to the Midland Soccer Club. **Applications must be received 2 weeks before the MSC registration deadline.** There will be NO EXCEPTIONS to this deadline. The determination of your scholarship benefit will be e-mailed to you the week following, so please include your e-mail address. Your player needs to be registered for the season, but do not pay until after the scholarship determination is made.
- Due to the high demand for scholarships, the **U4 age group is not eligible** for scholarships at this time.

Personal and Financial Information (Kept Confidential)

People Living in Household <small>Please include your name, spouse, significant other, parents, dependants & any others living in your home.</small>	Birthdate & Age	Annual Household Income <small>Attach documentation</small>
Total of all annual household incomes (attach documentation):		\$

Address: _____
(number, street, city, state & zip)

Home Phone: _____ Work Phone: _____
 Cell Phone: _____ Email: _____

Please indicate who you are requesting assistance for, and for which soccer program.

Name	Recreational/Select
_____	_____
_____	_____
_____	_____

Marital Status: Single ___ Married ___ Divorced ___ Child Support \$/mth _____

Please list any additional financial assistance you receive (ie government or community programs, subsidized lunch, etc.) Include \$/yr received if applicable

Please explain your need for the scholarship.

Certification: By my signature: 1) I certify that the above information is true and correct to the best of my knowledge; 2) I understand that this information is being given for the receipt of financial assistance; and 3) I agree that deliberate misrepresentation of the information will result in denial of scholarship benefits.

Signed: _____ Date: _____