

CITY OF LANSING
Parks & Recreation Department
SCHOLARSHIP PROGRAM

Description: Qualifying individuals or families who live within the city limits of Lansing are eligible to apply for assistance for dependents to participate in Parks and Recreation programs at a discounted rate.

Eligibility:

- Applicants must be residents of the City of Lansing. Applicants residing outside the city limits are not eligible.
- To qualify for a Parks and Recreation Scholarship you must meet the requirements of the USDA Food and Nutrition Service's Income Eligibility Guidelines.
- Applicant must be the legal guardian of the dependent.
- Dependents of qualified persons must be 18 years old or younger and attending school.

Application Procedure:

- The application must be completed and returned to the Parks and Recreation office no later than 4:30 p.m. on the date specified in the information provided for each program.
- Applicant must provide proof of ***all household income for all income-earning individuals in the household*** from all the sources specified in this document with their application.
- Information may be submitted to the Parks and Recreation Department in person during the business hours of 8:00 a.m. to 4:30 p.m., Monday through Friday, or by email to parks@lansingks.org.

After your application is approved:

- To register your child for an activity, the parent or legal guardian must visit the Parks and Recreation office during regular business hours and complete the registration process in person.
- Parents and/or Legal Guardians must complete all applicable registration and waiver forms for each activity.

Other Information:

- Scholarships are valid for one activity only. The application process must be completed for each activity's registration period.
- Scholarship recipients must follow all Parks and Recreation Department rules, regulations, and policies. Failure to do so will result in revocation of scholarship and loss of privileges.
- Qualifying individuals are required to copay a registration fee of \$10 per registrant and are not eligible for a registration refund.

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Applicant's Name: _____ Application Date: _____

Address: _____

Phone: _____ Email: _____

If you rent your residence, provide the following contact information regarding your property manager or owner:

Contact Name & Company: _____

Phone: _____ Email: _____

PERSONAL INFORMATION:

Number of people residing in this household: _____ (A household includes ***all income-earning*** people and children living at the provided address, including those who consider it their permanent residence, such as military personnel assigned overseas and college students).

Total annual household income: \$ _____
(Attach copies of all applicable household income documents with this application)

Dependent's Name(s) applying for scholarship: (Include first and last name)	Age:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Verification of any of the information contained in this application may be obtained from any source named herein. By the application, the undersigned consents to the release of income and residency information.

STATEMENT OF APPLICANT:

I do hereby solemnly swear, (or affirm) that the information provided herein is true and correct.

Applicant's Signature

Date

INCOME ELIGIBILITY DOCUMENTS

Please include copies of all income information for **all persons in the household** from the following sources:

YES	NO	Income Source
		Most recent IRS Federal Tax forms for <i>all persons in the household</i> .
		Paycheck stubs for the <u>most recent 3 pay periods</u> for <i>all persons in the household</i> .
		Check stubs or award letters for any unemployment compensation for <i>all persons in the household</i> .
		Social Security and/or Disability determination (or copy of the latest check/deposit) for <i>all persons in the household</i> .
		Award letters of ALL State Assistance including medical, food, and cash assistance for <i>all persons in the household</i> .
		Award letters for Child Support for <i>all children in the household</i> .
		Award letters or lease information for housing assistance or discounts.
		Letter of eligibility for retirement, annuity, and/or pension for <i>all persons in the household</i> .
		Statement of interest earnings for the <u>last two years</u> from all accounts for <i>all persons in the household</i> .
		Award letter or check stub for all estate and/or trust income for <i>all persons in the household</i> .
		Check stubs for any dividends paid in <u>2022-2023 (most recent months)</u> for <i>all persons in the household</i> .

OFFICE USE ONLY

Date Received: _____ Received by: _____

This application is: Approved Denied

Comments:

Authorized Signature

Date