



YOUTH SCHOLARSHIP PROGRAM

Recreation Division

Dear Applicant,

The City of Oakley proudly offers financial assistance through the Youth Scholarship Program. These scholarships are based solely on financial need.

In order to qualify you must be an Oakley resident; the participant must be under 18 years of age and meet the HUD very low income requirements. For example, a family of four with a total annual income of \$27,850 or less is eligible for a 50% scholarship per child per class. Your child may use this scholarship for up to two classes (per child) per year. Another example, a family of four with a total annual income of \$46,460 will qualify for a 25% scholarship. The City of Oakley requires an application, previous year tax returns, and current pay stubs for proof of income. Families that have incomes below the HUD low income limit are eligible to apply on a first-come first served basis.

Scholarships will be funded as long as resources are available. Program applicants may submit applications for consideration year round in concurrence with registrations for any activities advertised for this years' recreation guide. No matter when you submit your application, it will expire on December 31st of that year. You will need to fill another application out the following calendar year.

Applications will be reviewed within two weeks of receipt for staff approval. No refunds are allowed or available. Scholarship funds are available for City of Oakley sponsored programs only.

For more information please call the main recreation line at 625-7041.



YOUTH SCHOLARSHIP PROGRAM

Recreation Division

Applicant Information:

Name of Applicant: _____

Date: _____

Relationship of Applicant: (Please Check One)

☐ Father ☐ Mother ☐ Legal Guardian ☐ Other: _____

Contact Information:

Street Address

City

Zip Code

Home Phone

Cell Phone

Participant Information:

Child's Name (Last Name/ First Name)	Age	Birth Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Employment Information:

Father's Employer: _____

Father's Employers Address: _____

Street Address

City

Zip Code

Phone

Fax Phone

Mother's Employer: _____

Mother's Employers Address: _____

Street Address

City

Zip Code

Phone

Fax Phone



Display of Financial Need

Our Family Currently Receives: (Please Check All That Apply)

- ☐ AFDC ☐ School Lunch Assistance ☐ Public Assistance
- ☐ SSI | Food Stamps | Rental Assistance
- ☐ Other

Please attach the previous years tax returns and at least two current pay stubs for proof of income. If you do not receive any kind of financial assistance, please attach some verification of your yearly family income. This information must be verified quarterly.

PLEASE REFER TO INCOME TABLE BELOW:

Persons in Household

Income Category	1	2	3	4	5	6	7	8
Low	\$50,150	\$57,300	\$64,4500	\$71,600	\$77,350	\$83,100	\$88,800	\$94,550
Very Low	\$32,550	\$37,200	\$41,850	\$46,460	\$50,200	\$53,900	\$57,600	\$61,350
Extremely Low	\$19,500	\$22,300	\$23,250	\$27,850	\$30,100	\$32,570	\$36,730	\$40,890

Number of Persons in Household: _____ Yearly Family Income: _____

Verified By:

- ☐ Tax Return ☐ Employer Verification ☐ Other

I hereby certify that the annual family income above represents all means of support from employment income and government assistance. In addition, I understand this information is subject to verification by authorized officials from the Department of Housing and Urban Development and/or City of Oakley.

Name (Please Print): _____

Signature: _____

For office use only

Applicant Within Very Low ☐ Yes ☐ No

Applicant With Extremely Low ☐ Yes ☐ No

Registration Form Attached ☐ Yes ☐ No

Staff Initials: _____

