



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 \$25,850 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 \$43,050 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 a two week period of receipt. Please keep in mind the class date when you complete the form. No refunds for classes or previous classes 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.



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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 or at least two current pay stubs for proof of income. If you do not receive any kind of financial assistance, please attach some type of verification of your yearly family income. This information must be verified.

PLEASE REFER TO INCOME TABLE BELOW:

Persons in Household

Income Category	1	2	3	4	5	6	7	8
Lower	\$39,050	\$44,600	\$50,200	\$55,750	\$60,200	\$64,700	\$69,150	\$73,600
Very Low	\$24,400	\$27,900	\$31,350	\$34,850	\$37,650	\$40,450	\$43,200	\$46,000
Extremely Low	\$14,650	\$16,750	\$18,800	\$20,900	\$22,600	\$24,250	\$25,950	\$27,600

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: _____