

# People Helping People Scholarship Application

Apply for a scholarship in 5 easy steps!

<b>1. APPLICANT INFORMATION</b>		
Name:		
Address:		
City:	State:	Zip
Date of Birth: / /		
Phone Number (s)		
Email:		
<b>(We contact you on scholarship status by email to help keep our mailing costs down. Otherwise, you will get a letter in the mail.)</b>		

<b>2. LIST NAMES OF ALL PERSONS ON THE SCHOLARSHIP</b>		
Please circle M or F male or female		
Adult _____	DOB _____	M F
Adult _____	DOB _____	M F
Child _____	DOB _____	M F
Child _____	DOB _____	M F
Child _____	DOB _____	M F
Child _____	DOB _____	M F
<b>(Required) Emergency Contact: OTHER THAN YOURSELF</b>		
Name: _____	Phone: _____	

**3. MEMBERSHIP APPLYING FOR: (Mark only one)**

Youth (5-14)

Young Adult (15-26)

Adult (27-61)

Single Parent Family

Household\* (Family)

Senior Ind./Couple (62+)

\*Household includes anyone living in your household.

**CHILD CARE PROGRAMS**

Programs

Aquatics

After School

Day Camps

Preschool

Tumbling

Tae Kwon Do

Jui Jitsu

**4. TO QUALIFY FOR A SCHOLARSHIP, PROVIDE THE FOLLOWING DOCUMENTS**

Attach all applicable financial documents and turn in to the Illinois Valley YMCA Courtesy Counter. Not all need to be turned in if you have your Federal 1040

- (THIS MUST BE TURNED IN)** Current Federal Tax 1040 Form, or a statement from the IRS that you don't file taxes. (The IRS can be contacted at 800-829-1040)
- Rent Assistance
- Food Stamps (SNAP Benefits)
- Birth Certificates/Guardianship Papers (Only for children not on taxes)
- Two current pay stubs (For all adults in the household)
- Unemployment (For all adults in the household)
- Court ordered Child Support or Alimony
- Social Security or Disability statement (For all adults in household)
- IF YOU HAVE NO FORMS OF INCOME, YOU MUST PROVIDE A LETTER FROM THE PERSON SUPPORTING YOU AND A REFERRAL LETTER FROM SOMEONE NOT RELATED TO YOU (School, clergy, caseworker, etc.)

**THIS APPLICATION MUST BE RENEWED EVERY 12 MONTHS**

I certify that the above information is true and complete to the best of my knowledge, and that I do not have additional income not represented above. I agree, if necessary, to send additional information and documentation to support the above statements. I understand that sponsorship assistance is based on need. If I am over the guidelines set by the Illinois Valley YMCA, I will be informed of this and I will not qualify for a scholarship. I understand that if I falsify any of the above information, I will not be eligible for assistance now and/or in the future.

\_\_\_\_\_  
Signature of person completing this form

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

APPROVED: YES NO

YMCA\$ \_\_\_\_\_

APPLICANT \$ \_\_\_\_\_

DATE: \_\_\_\_\_

**5. TELL US MORE...** Use this space to include any additional information or extenuating circumstances that were not included on this application. If you need more space, attach an additional sheet of paper.

I want/need a YMCA scholarship because: