



Financial Assistance Application

This application is not to be considered a guarantee of financial assistance. Please complete the information requested below and indicate with the letters “NA” when information requested does not apply to you. A Proehlific Park representative will contact you with any questions or additional information needed.

Scholarship recipients must provide their own transportation. Please allow 4 weeks to process your request. You will be contacted if your application has been approved.

Your application must be accompanied with the following documents:

1. Copy of past two pay stubs (most recent)
2. Copy of most recent report card
3. Copy of recommendation by Coach, Teacher, School Counselor or Pastor

1. Applying Child/Children

| Child's Name | DOB | Age | Gender | Special Conditions |
|--------------|-----|-----|--------|--------------------|
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| | | | | |
| | | | | |

Parent/Guardian's Name: _____

Address: _____ City: _____ State: ___ Zip: _____

Home Phone #: _____ Work Phone #: _____ Cell Phone#: _____

Email Address: _____

2. Family Information: How many dependants live in your household? _____

3. Reason assistance is needed (please circle all that apply):

Low Income Unemployment Academic or Job Training Program Social/Emotional Need

Special/Other (please explain): _____

4. I am applying for financial assistance for the following area:

____ Membership: Gold Silver Bronze

____ Program: Camp Lesson Package Tutoring Other Program: _____

____ Team Fee: (please list team and coach) _____

____ Other: _____

5. Employment Information: Please complete all information and submit copies of your two most recent pay stubs for all persons living in your household who are employed.

| Name of parent/guardian of youth | Name of spouse or other adult if applicable |
|----------------------------------|---|
| | |
| Employer's Name and Address | Employer's Name and Address |
| | |
| | |
| | |
| Phone# | Phone# |

6. Monthly Income: What is the gross, monthly household income? _____

7. Share your personal story with us: (to be completed by the child applying for financial assistance)
(use back if necessary)

Why do you want to spend time at Proehlific Park?

Tell us about your interest in sports and/or your sports background:

What do you hope to achieve at Proehlific Park?

8. Community Service: Tell us about your present or past involvement in the community with name and time of your service (i.e., Soup Kitchen from March - December 2008) if any.

9. Scholastics: Please attach a copy of your current or most recent report card

