

Northwest United FC
Scholarship Application

Return all forms by Sept. 1 to P.O. Box 577, Mt. Vernon, WA 98273

Full Name of Player: _____ Team/coach name: _____

Parent's Name: _____ Members in household: _____

Address (Street, City, State, Zip): _____

Telephone contact: _____ Cost per player on this team: _____

Amount you can pay: _____ Amount in need: _____

Other children playing with NWU (please include name, team, scholarship amount):

Criteria: In order to be eligible to receive financial assistance for a scholarship, the applicant's family must show financial need. The schedule below is based on the current National Reduced Fee Lunch program and reflects individuals who qualify for low-income status:

Household Size	Annual	Monthly	Weekly
1	\$20,036	\$1,670	\$386
2	\$26,955	\$2,247	\$519
3	\$33,874	\$2,823	\$652
4	\$40,793	\$3,400	\$785
5	\$47,712	\$3,976	\$918
6	\$54,631	\$4,553	\$1,051
7	\$61,550	\$5,130	\$1,184
8	\$68,469	\$5,706	\$1,317

Indicate yearly/monthly/weekly (circle one) income: _____. You **must** provide proof of income and requested information to be considered for a scholarship.

Please provide verification of the following: Free School lunch program, Welfare coupons, Childcare Assistance, Food Stamp Program, Medicaid, Aid for Dependant Children, or most recent year's 1040 tax return. (All documentation will be confidential and will only be used to verify eligibility. These items will be destroyed or returned to you after use.)

If you do not have one of the above, or wish to provide other verification, you may provide: proof of income with most recent tax return, current check stubs (including pay period), or other documentation to verify your income. (Documentation will be held in confidence and will be destroyed or returned.)

Applicants may also include a separate sheet with a letter of explanation as to your family's situation.

I understand that Northwest United cannot approve all applications for scholarships. I do not hold Northwest United liable for any information I provide along with unforeseen expenses that occur during the 2011 soccer season within my team. I understand that in accepting scholarship funds I agree to pay all team fees in a timely manner. The information that I have provided is true and correct and I will notify them of any change in my current income.

Parent Signature: _____ Date: _____