

## Northwest United FC

### **Scholarship Application for Further Assistance 2010-2011 (beyond initial \$225)**

Return all forms by Aug. 15 to P.O. Box 577, Mt. Vernon, WA 98273 or fax 424-7681

Full Name of Player: \_\_\_\_\_ Team Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Members in household: \_\_\_\_\_

Address (Street, City, State, Zip): \_\_\_\_\_

Telephone contact: \_\_\_\_\_

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	\$16,242	\$1,354	\$312
2	\$21,855	\$1,821	\$420
3	\$27,465	\$2,289	\$528
4	\$33,075	\$2,756	\$636
5	\$38,685	\$3,224	\$706
6	\$44,295	\$3,691	\$852
7	\$49,905	\$4,159	\$960
8	\$55,515	\$4,626	\$1,068

**One way to qualify for more aid is to 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 2010 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. I further agree to provide Northwest United with 10 hours of volunteer work.*

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_