



Parks & Recreation Department
 9291 Old Redwood Hwy, Bldg. 300D
 Windsor, CA 95492
 (707) 838-1260
 www.townofwindsor.com/recreation

**April 1, 2019 - March 31, 2020
 RECREATION SCHOLARSHIP
 PROGRAM APPLICATION**

Application Date:		Main Contact:	
		Last Name	First Name
Primary Recipient(s):			
Last Name		First Name	
Address:			
City:		State:	Zip Code:
Primary Phone:		Secondary Phone:	
Email Address:			

Qualification for the scholarship program will be determined by financial need and residency. Please provide documentation in each of the two below categories **with this** application:

- Proof of Financial need (At least one of the following):**
 - Proof of participation in National School Lunch Program (NSLP) qualifying for free or reduced meals through school
 - AFDC: Aid to Families with Dependent Children Program
 - County Relief, General Relief (G.R.) or General Assistance
 - CalFresh (Formerly Food Stamps) – Must provide proof of eligibility within the past 60 days.
 - W.I.C. (Women, Infants and Children) – Must provide proof of eligibility within the past 30 days.
- Proof of Residency or Attendant at Windsor Unified School District**
 - A current utility bill (dated within the last 60 days) and a picture ID
 - Letter of Attendance

- Office Use Only -	
Date Received: _____	Received by: _____
Documentation Received (attach copies): _____	
Approved: YES NO	Entered Scholarship: <input type="checkbox"/> Notes (Primary Acct) <input type="checkbox"/> Alert (Participant) <input type="checkbox"/> Excel Entry: <input type="checkbox"/>
Amt Received: _____ Date: _____	Amt Remaining: _____ Excel Entry <input type="checkbox"/> Notes Entered <input type="checkbox"/>
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Amt Received: _____ Date: _____	Amt Remaining: _____ Excel Entry <input type="checkbox"/> Notes Entered <input type="checkbox"/>
Approved by: _____	Date Approved: _____