Lake Oswego Parks & Recreation Scholarship Application

The Lake Oswego Parks & Recreation Department offers a limited number of partial scholarships for City of Lake Oswego and L.O. School District residents needing financial assistance. *Resident applicants may receive up to a maximum of $50 per class, up to 50% of the cost of a program, maximum $160 per person per fiscal year (July 1-June 30) and a maximum of $300 per fiscal year per family.

A completed application must be submitted **ten calendar days prior to the program start date** for processing. Scholarship applications may be submitted by email, fax, mail, or walk-in to the Parks & Recreation Department. For more detailed information, please contact; Judy Nelson at jnelson@lakeoswego.city or call at 503-675-2549

Return Scholarship to:
Judy Nelson
Email: jnelson@lakeoswego.city
Fax: 503-697-6579
Mail: Parks & Recreation Department
      P.O. Box 369
      Lake Oswego, OR 97034
*OR **bring** to:*
17525 Stafford Road
Lake Oswego, OR 97034
For questions call: 503-675-2549

PROGRAM INFORMATION

Participant First Name:_____ Last Name:_____ DOB:_____

Class Title: _____

Activity Number: _____

Start Date: _____

Program Fee: _____ *Scholarship Amount Request: _____ Participant Payment: _____

PRINT NAME OF PERSON COMPLETING THIS APPLICATION

ADULT First Name:_____ Last Name:_____ DOB:_____

Phone Number:_____ Email:_____

Address: _____ City:_____ Zip:_____

HOUSEHOLD MEMBERS & MONTHLY INCOME

Employed

NUMBER IN HOUSEHOLD   ADULTS: _____ CHILDREN: _____

TOTAL GROSS INCOME: MONTHLY:_____ YEARLY:_____

Please check if you are currently eligible for any of the following programs:
___ Free/Reduced Lunch program in Lake Oswego School District
___ Oregon Health Plan
___ Oregon Trail Food Stamps
___ Social Security Benefits
___ Unemployment
___ Other (Please explain below if there are other circumstances that limit your ability to pay for P&R activities)

_____

_____

_____

The scholarship program is dependent upon donations from groups and individuals and a limited amount of funding is available. Many thanks to the generous online donations of class participants and to our major sponsors Lake Oswego Mom's Club and StarCycle.

I certify that the above information is true and correct. I will notify the Parks & Recreation Department of any changes in scholarship program eligibility. I understand that the City of Lake Oswego may verify the information on the application and that a deliberate misrepresentation of the information will result in forfeiture of assistance and may prohibit future eligibility for the Scholarship Program.

Date: _____ Signature of person completing form: _____

COMPLETE IF PAYING BY CREDIT CARD	*For Office Use Only*
Card #: Visa or MasterCard	Approved by:
Exp. Date:	
Name on Card:	Amount Approved: Initials: