



### Lake Oswego Parks & Recreation Scholarship Application

The Lake Oswego Parks & Recreation Department believes that recreation is for everyone and recognizes cost can be a barrier to participation. Resident applicants may receive up to a maximum of \$75 per class, up to 50% of the cost of a program, maximum \$200 per person per fiscal year (July 1 - June 30) and a maximum of \$500 per fiscal year per household."

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

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

#### PROGRAM INFORMATION

Participant First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ DOB (month/year): \_\_\_\_\_

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: \_\_\_\_\_

Scholarship award criteria (proof is not required and sensitive information is confidential):

- Household income is below the Federal Free Meal Guidelines.
- Any applicants currently receiving Temporary Assistance for Needy Families (TANF) or SNAP benefits from State are eligible for financial aid/scholarships.
- If an individual does not participate in the two programs listed, they may qualify if monthly gross income falls below the Federal Free Meal Guidelines.
- Temporary situations such as unemployment or other circumstances not listed.

The scholarship program is dependent upon donations from groups and individuals; many thanks to the generous online donations of class participants and to our major sponsors.

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: \_\_\_\_\_

<b>COMPLETE IF PAYING BY CREDIT CARD</b>	
Card #:	
Exp. Date:	
Name on Card:	

<i>For Office Use Only</i>	
Approved by:	
Amount Approved:	Initials: