



## FY19 - Guidelines and Criteria

The Round Rock Parks and Recreation Department Youth Scholarship Program provides financial aid for eligible City of Round Rock youth, up to and including age 21\*, who are without the financial means, and opportunity to participate in any Parks and Recreation classes, programs and activities.

1. Scholarship money is awarded on a first come/first served basis and application and approval does not register your child in the class.
2. Upon scholarship approval, funding is not guaranteed; scholarship is awarded as registrations occur.
3. Maximum amount given per fiscal year will be \$200/child (pending funding availability). Scholarships will be granted only if funds are available and can be used October 1, 2018 - September 30, 2019 and scholarships **MUST be used by Sept 30<sup>th</sup> or will be lost.**
4. Youth scholarship program will pay 80% of user fee. Participant responsibility is 20% of user fee.
5. Scholarship cannot be used toward balances on account from prior registrations or reimbursements. You ***must be approved in program prior*** to program registration.
6. Youth Scholarships are for youth 17 and younger, \*children with special needs (as specified by school district) 21 years and younger. Scholarships can be used for lessons, programs and activities offered by Round Rock Parks and Recreation except facility admission fees.
7. Applicants must be residents living within the city limits of the City of Round Rock by individual producing a water bill, lease agreement/bill of sale (property) or valid driver's license/state I.D. Card. PARD team members will then use the city's data base, Maps Co, or Williamson County Appraisal District website to verify residency. Please be aware there are areas in the city that are not city residents-MUDs.
8. Applications must be completed and received in the Parks and Recreation Department office located at 301 W. Bagdad, Round Rock, TX Mon-Fri: 8am-5pm OR Clay Madsen Recreation Center administrative office at 1600 Gattis School Rd Mon-Fri 8am-6pm, OR via email [jthornton@roundrocktexas.gov](mailto:jthornton@roundrocktexas.gov) or faxed to (512) 218-5548 a **minimum** of two weeks before first day of program.
9. All application and financial information provided are considered private and will be kept confidential.
10. Applicants will be notified either by email, mail or phone as to the outcome of their scholarship request in a timely manner.
11. Failure to attend an activity or program that has been paid through the scholarship program without proper notice may jeopardize future scholarship funding for the family. Upon the second no show in one year (Oct 1- Sept 30), recipient will not be allowed to participate in program and will be withdrawn.
12. Persons applying for scholarship funding must meet certain income limits to qualify for scholarship funding. **Applicant must show proof of income by attaching one of the following to the scholarship applications:**
  - a. Verification letter indicating the applicant qualifies for Free or Reduced Hot Lunch Program.  
**OR**
  - b. Most recent copy of the family's Federal Income Tax Form.- ***please black out Social Security Number.***  
**OR**
  - c. Verification letter indicating the applicant qualifies for Medicaid.

### Income Eligibility Guidelines

Household Size	Income Eligibility Limits	Household Size	Income Eligibility Limits
1	\$22,311	5	\$53,243
2	\$30,044	6	\$60,976
3	\$37,777	7	\$68,709
4	\$45,510	8	\$76,442
Each additional child add \$7,733			

\*\*\*Income limits based on Texas Reduced lunch program SY18 guidelines (7/1/18). \*\*\*

13. We understand that from time to time families may encounter some unforeseen and unfortunate circumstances, emotionally or financially. If you feel you are in need of scholarship assistance, but do not meet the income guidelines, please attach a letter to your application form stating your circumstances. These are special circumstances and will be handled on a case-by case-basis.

14. Round Rock Parks and Recreation Department reserves the right to verify all information contained on the application form in order to grant, deny or revoke any scholarship monies.
15. Questions should be directed to the Round Rock Parks and Recreation office, 512.218.5540.
16. **In the event the participant cancels or withdraws from the class, program or camp the scholarship funding is lost and not transferable.**

**FY19 - Round Rock Parks and Recreation Youth Scholarship Application *one per child***

Applications must be completed and received in the Parks and Recreation Department office located at 301 W. Bagdad, Round Rock, TX OR Clay Madsen Recreation Center 1600 Gattis School Rd OR via email [jthornton@roundrocktexas.gov](mailto:jthornton@roundrocktexas.gov) or faxed to (512) 218-5548 a **minimum** of two weeks before the first day of program.

Your Application will be processed and you will be notified within 7 calendar days of receipt date.

**PLEASE PRINT**

PARENT/GUARDIAN NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

PARTICIPANT NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

MALE OR FEMALE ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

BEST CONTACT #: \_\_\_\_\_ OTHER # \_\_\_\_\_

EMAIL \_\_\_\_\_

EMERGENCY CONTACT NAME & NUMBER: \_\_\_\_\_

**ETHNICITY:**

- White
- Am. Indian/Alaskan Native (AI)
- Asian & White (AW)
- Asian
- Black/African American & White (BW)
- Other Multi-Racial (O)
- Hispanic
- Native Hawaiian/Other Pacific Islander (HI)
- Am. Indian/Alaskan Native & White (IAW)
- Black/African –Amer.

**Acknowledgement of Correct Information:** I acknowledge that the information contained on this application is accurate and correct. I hereby give permission to the Round Rock Parks and Recreation Department to verify this information. I understand that if any information on this application form is found to be incorrect, my privileges of applying for scholarship funding could be revoked. I understand that I must provide income and resident information as required to qualify for scholarship.

**I understand that approval for Scholarship funding DOES NOT GUARANTEE scholarship funding; money is distributed upon my return for registration and I have READ the Guidelines and Criteria for the Scholarship program.**

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*

**FY18-For Office use only, Applicant does not complete:**

INTAKE STAFF: Receipt date: \_\_\_\_\_ Residency Verified  Photo ID

Income Justification Attached

- School District Letter for Free or Reduced Hot Lunch
- Current Year's Tax Return  Medicaid Letter/Card - **\*Attach copy of bill to verify residency**

Intake staff printed name: \_\_\_\_\_

**YOUTH SCHOLARSHIP ADMINISTRATION:**

Request is:  Approved  Denied  Notified Date \_\_\_\_\_

Class Adjustments Made & Date: \_\_\_\_\_

Signature of Parks and Recreation Manager \_\_\_\_\_ Date \_\_\_\_\_