



## FC SALMON CREEK – SCHOLARSHIP FORM

The FC Salmon Creek Soccer Club (FCSC) seeks to provide the development of the community's youth through athletics. The FCSC has created a scholarship program which may provide some financial assistance for need-based families. It is our goal to use these scholarship funds to help those who need it most.

### **Scholarship Guidelines:**

- A parent or legal guardian of a participant who qualifies for free/reduced lunch program may apply for a scholarship for financial assistance of registration fees. You must submit a copy of your qualification letter with your scholarship application. When an applicant is receiving free or reduced lunch, it is evidence of the person's low income and inability to pay FCSC fees.
- Eligibility for our scholarship program does not guarantee that you will receive assistance. Funds are limited and will be distributed as available on a discretionary basis to those who qualify.
- Scholarships only apply to the registration fee. Additional fees such as uniforms, tournament fees, camps, clinics and fundraising. Scholarship funds will **not** cover these additional fees. All fees above and beyond the registration fee are the responsibility of the participant.

### **Additional Information:**

- All payments must be made online.
- If online payment is not received by the registration deadline, there is no guaranty that a place will be available for the participant.
- Scholarships will not be granted for registration fees already paid.
- Late or incomplete application submissions may result in participants not being placed on a team.
- Scholarship funds will be awarded based on the financial need of the applicant and availability of funds.
- FCSC will use reasonable care to keep all information confidential.
- If at any time the parent or participant is in violation of the FCSC Code of Conduct policy, future scholarship assistance will be affected.

### **Application Process:**

- To apply for an FCSC scholarship, please email your application and qualification letter to: [alcregistrar@salmoncreeksoccer.com](mailto:alcregistrar@salmoncreeksoccer.com) or mail to FCSC, 800 NE Tenney Road, Suite 110, #102 Vancouver, WA 98685.
- Approval process will be handled by the FCSC Scholarship Committee
- You will be notified regarding the status of your application prior to the start of the season. We will contact you via email. If you prefer a different form of communication, please let us know.
- \$200 deposit is required to be paid by the June 1, 2019 deadline.

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Parents Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

You will be contacted by email regarding your scholarship application. If you prefer a different form of communication, please let us know.

**This form must be accompanied by proof of enrollment in the free/reduced lunch program at your school.**

1. My child(ren) receive reduced school lunches:    Yes [ ]                      No [ ]

2. My child(ren) receives free school lunches:    Yes [ ]                      No [ ]

3. School Calendar Year \_\_\_\_\_

4. Please list the child(ren) participating in FCSC below:

<b>Participant First and Last Name</b>	<b>Team</b>	<b>School</b>	<b>Gender</b>	<b>Birth Date</b>	<b>Grade</b>	<b>Amount (FCSC use only)</b>

Submit this completed form with a copy of your qualification letter from the school or school district office.

FCSC offers financial aid assistance to those players that demonstrate a need. Please explain in the following paragraph why you need aide. Providing more information to the FCSC review committee allows us to make a better decision for the applicant and Club. Please provide us with as much detail as possible.

All information provided must be true and accurate. Providing false information may result in player/family ineligibility for the current and/or future sports participation.

I certify that I have read and understand the information on this form, and that the information submitted is complete and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

<b>APPROVED:</b> (You will be notified of scholarship status via email.)	
_____ Signature of FCSC Representative	_____ Date