

SCYF SCHOLARSHIP POLICY

Requirements for eligibility:

1. Families are eligible to apply for scholarships for up to two children.
2. For **tackle** football and tackle cheer, a \$65 registration/administration fee must be paid per child and is not eligible for scholarship, without exception.
3. For **flag** football and flag cheer, a \$30 registration/administration fee must be paid per child and is not eligible for scholarship, without exception.
4. Families may apply for partial scholarship or full scholarship. For tackle football and cheer, scholarships are available for up to \$100; for flag football and cheer, scholarships are available for up to \$40.
5. The child must attend all scheduled practices, games and team events at the designated times.
 - Family emergencies and pre-excused family reasons excluded
6. A family member must volunteer in at least two volunteer opportunities during the season.
7. Application must be completed by a parent, guardian, or head of household, with attached copies of **all** requested information provided.
 - Incomplete applications will not be considered
 - Please mail application along with documentation to:
SCYF
Attn: Jamie Roberson
P.O. Box 702028
St. Cloud, FL 34770
8. Priority will be given to eligible youth meeting one or more of the criteria below:
 - Member of a multi-child family.
 - Living in a single parent home.
 - Receiving assistance from programs such as: Food Stamps, Medicaid, SSI, Foster Care, WIC, etc.
 - ◇ Must provide written documentation of participation in these programs to receive priority status
 - Written recommendation by school representatives, social workers, youth community center workers, or other social services representatives.
9. Approval of a registration scholarship does not register the participant in the activity. Athlete must still register with the league and pay league one registration fee.

SCYF SCHOLARSHIP APPLICATION

Please complete the following information, one application per child:

Athlete's Name: _____ **Age:** _____

Male/Female: _____ **DOB:** _____

Street Address: _____

City: _____, **FL Zip:** _____

School Athlete Attends: _____ **Grade:** _____

Athlete lives with: () Both Parents () Mother () Father () Other

Amount of scholarship requested: Full \$ _____ Partial \$ _____

League this scholarship request applies to: (Please check a box below)

Tackle _____ Flag _____ Cheer _____ Flag Cheer _____

Season for scholarship request: () Spring () Fall Year: _____

Has this athlete previously received scholarships from SCYF? _____

If yes, what years: _____

Yearly Amount \$ _____

NOTE:

Family will still be responsible for payment of administration/registration fees for each child.

◇ \$65 for tackle football & tackle cheer

◇ \$30 for flag football & flag cheer

PARENT / GUARDIAN INFORMATION:

Total Household Annual Income: \$ _____

of dependent children in your household during the last tax year: _____

Father's Name: _____ Occupation: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

Mother's Name: _____ Occupation: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

CONSENT TO RELEASE INFORMATION

I understand that my signature authorizes SCYF to obtain verification of all information on this application and that additional information may be necessary for approval of this application. I certify that all of the information on this form is true and correct. **I understand that my child(ren)'s participation in this program requires a commitment to attend 100% of the scheduled practices and games except in case of family emergency or preapproved and excused by coach.**

Parent/Guardian Signature _____ Date: _____