



## City of Auburn, Maine

Recreation Sports Facilities

Sabrina Best, Recreation Director

48 Pettengill Park Road | Auburn, Maine 04210

[www.auburnmaine.gov](http://www.auburnmaine.gov) | 207.333.6601

## Financial Aid Checklist

PLEASE MAKE NOTE OF OUR GUIDELINES

1. Financial assistance must be submitted by March 6, 2020 – **NO EXCEPTIONS!**
2. We cannot provide financial assistance if you have an outstanding balance for any recreation programs. Scholarships are for Auburn Residents ONLY
3. You will be notified in writing about the amount of assistance that is available for you.
4. If you are receiving any other financial assistance for summer camp, you will not qualify for the summer camp scholarship.
5. Scholarship funds are based on the total registration cost for summer camp (this excludes all early registration discounts)

\_\_\_\_\_ Application (filled out and signed)

\_\_\_\_\_ Tax Return Copy (most recent)

\_\_\_\_\_ Paycheck Stubs (most recent for all adults)

\_\_\_\_\_ Savings Bank Statement (if needed)

\_\_\_\_\_ Any other form of income (Circle included: Social Security, SSI, Unemployment, Food Supplement, TANF, Child Support)

Timeline for Summer Camp Financial Aid:

**Deadline for all forms and application – Friday March 6, 2020**

Financial Aid Award Letters mailed out – Friday March 20, 2020

Registration Deadline for Summer Camp - Friday June 19, 2020

Full Payment is required before the first day of camp – Monday June 22, 2020

Office Staff

**Parent Name:**

**Household Size:**

**Annual Income:**

**% Median:**

**% Qualified: 25%    50%    75%    Not Qualified**

**# Children in Summer Camp:**

**Total Amount Awarded:**

**Total Amount Due:**

**APPLICATION FOR RECREATION SCHOLARSHIP**

**Auburn Parks & Recreation Department,  
48 Pettengill Park Road, Auburn, Maine 04210  
Grant Administrator: Sabrina Best**

Median % \_\_\_\_\_  
Qualifies \_\_\_\_\_  
Total Amount \_\_\_\_\_

The Auburn Recreation Department has received funding from the City of Auburn’s Community Development Block Grant Program to provide grants to children based upon their parents’ income. To qualify for this grant, you must be an Auburn Resident and we must obtain certain information from you. **Please fill in the information requested on this form, if applicable, and return with copies of most recent check stub from your employer and the most recently filed federal income tax return.** If you are not employed, please provide proof of your current income. **PLEASE NOTE: If you are receiving any other financial assistance for summer camp, you will not qualify for the summer camp scholarship.**

Name \_\_\_\_\_ DOB \_\_\_\_\_ Home/Cell Telephone \_\_\_\_\_

Spouse \_\_\_\_\_ DOB \_\_\_\_\_ Email: \_\_\_\_\_

Address \_\_\_\_\_ Work Telephone \_\_\_\_\_

Number of Persons Living in Household \_\_\_\_\_ Adult \_\_\_\_\_ Children \_\_\_\_\_

Scholarship Applicant \_\_\_\_\_ DOB \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_ Entering/In Grade \_\_\_\_\_

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Is Head of Household **Male** \_\_\_\_\_ **Female** \_\_\_\_\_ Is Head of Household **Handicapped** \_\_\_\_\_ **Elderly** \_\_\_\_\_

**ETHNICITY: (Select one or more)** **Hispanic or Latino** \_\_\_\_\_ **Not Hispanic or Latino** \_\_\_\_\_

**RACE: (Select one or more)** American Indian or Alaskan Native \_\_\_\_\_ Asian \_\_\_\_\_ White \_\_\_\_\_

Black or African American \_\_\_\_\_ Native Hawaiian or Other Pacific Islander \_\_\_\_\_

American Indian/Alaskan Native & White \_\_\_\_\_ Black/African American & White \_\_\_\_\_

Asian & White \_\_\_\_\_ American Indian/Alaskan Native & Black/African American \_\_\_\_\_ Other Multi-racial \_\_\_\_\_

**INCOME:** (Include all money, i.e. wages and benefits, received by ALL members of your household.)

**Please Circle One:** These numbers reflect income is on a: **annual** **monthly** **weekly basis**

Gross Pay \$ \_\_\_\_\_ Spouse’s Gross Pay \$ \_\_\_\_\_

Interest Income \$ \_\_\_\_\_ Food Supplement \$ \_\_\_\_\_

Social Security/SSI \$ \_\_\_\_\_ Child Support/Alimony \$ \_\_\_\_\_

Retirement Benefits \$ \_\_\_\_\_ TANF \$ \_\_\_\_\_

Other \$ \_\_\_\_\_ Unemployment \$ \_\_\_\_\_

**Total Income** \$ \_\_\_\_\_

**CERTIFICATION:**

I authorize the City of Auburn to obtain verification of all sources of income including federal income tax returns necessary to evaluate my application for a recreation scholarship with the City of Auburn. I understand that the Auburn Parks and Recreation and Community Development Departments will hold this information as confidential. I hereby certify that the information contained in this application is accurate and complete to the best of my knowledge and belief. If I have intentionally falsified any information or omitted information necessary to prevent statements from being misleading, I understand that I will be liable to the City of Auburn and that falsification or omission(s) would be considered a Class D Crime.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Spouse’s Signature

\_\_\_\_\_  
Date