

**ESSEX PARKS AND RECREATION DEPARTMENT
RECREATION SCHOLARSHIP APPLICATION FORM**

Parent/Guardian Information: _____

Request Date: _____

Last Name: _____ First Name: _____

Street Address: _____ City/Town: _____ Zip: _____

Phone: (Day) _____ (Evening) _____

Number of family members' _____ Annual Household Income: _____

Participant Information

Last Name: _____ First Name: _____

Date of Birth: _____

Public Assistance Eligibility: Please check any that apply to your household

- _____ Aid for dependent children /Childcare assistance
- _____ Food Stamps / 3 Squares
- _____ Free or reduced lunch at public schools
- _____ Other Please specify _____
- _____ Reach-Up
- _____ Fuel Assistance
- _____ Disability
- _____ Unemployment

**If your family receives any of the above assistance we require a copy of that documentation.

Required Documentation – Any provided documentation will be destroyed after the Town's annual audit.

- Most recent tax returns
- Most recent pay stubs
- Unemployment filing documents
- Childcare subsidy if applicable

Program Enrollment

Activity Name: _____ Session _____ Program Fee: _____

Activity Name: _____ Session _____ Program Fee: _____

Activity Name: _____ Session _____ Program Fee: _____

Activity Name: _____ Session _____ Program Fee: _____

Total: _____

STAFF USE ONLY

Amount approved _____

Program fees _____

Amount due _____

Explanation of decision _____

Date approved _____

Director Approval _____