

Denison Youth Sports

Joshua Holder Baseball Scholarship Application

OVERVIEW

Denison Youth Sports (DYS) may grant scholarships for registration fees to area youth, who without financial assistance, would be unable to participate in DYS sports programs. The DYS scholarship program focuses on providing opportunities for area youth to participate in recreational team sports because of the physical, mental, and character-building benefits these programs can provide. Scholarships are only available to cover the cost of registration for recreational teams and are not available to cover any additional costs (equipment, optional tournament fees, etc.).

Scholarship requests must be submitted to DYS no later than two (2) weeks prior to the regular registration deadline (date at which late registration begins). Scholarships may not be awarded until one (1) week prior to the late registration deadline. The scholarship committee, which includes representatives from the DYS Board of Directors, including the President, will consider all complete applications received by the application deadline. The amount of the scholarship awarded (if any) may be a partial or, in certain situations a full scholarship, depending on the number of applicants and the amount of scholarship funds available. If the number of scholarship applications submitted and approved exceeds the amount available, the scholarships will be awarded by a lottery system.

DYS is a 501(c)(3) non-profit organization with limited funding available for scholarships. No guarantee of assistance is implied by this application.

ELIGIBILITY

Requirements for eligibility:

- Athletes must of eligible age to participate in a DYS Program.
- Parents/Guardians (and athletes) commitment to attend a minimum of 80 % of all scheduled practices and games.
- Parents/Guardians agree to participate in at least eight (8) hours of voluntary service to DYS during the season of sponsorship. Volunteer work will be under the direction of the DYS Board of Directors, and may include participating in fund-raisers, working in concession stands, field work (Field Maintenance Day, picking up trash, maintaining or chalking fields) or other duties as assigned by the DYS Board of Directors.
- Application must be completed by a parent, guardian, or head of household, with all requested information provided. Incomplete applications will not be considered. The application is on the following pages.
- The maximum amount awarded per recipient family is \$599.00 per calendar year. Per IRS guidelines, DYS is required to issue a Form 1099 to any individual or family that has received \$600.00 or more in funds or compensation in a calendar year.

PROCESS & QUALIFICATIONS

Process

- Complete the DYS Scholarship Application Form, which must be signed by a parent/guardian and read and sign the Terms and Conditions statement. Prior to the application deadline, either mail / email the application to the address listed on the bottom of the application, or hand in person to a DYS Board Member.
- Include with the application either (1) proof of current income for all household members or (2) a personal financial hardship statement (see Qualifications). Examples of proof of income include:
 - 1 Month of current consecutive pay stubs (4 weekly, 3 bi-weekly, or 2 bi-monthly pay stubs).
 - Printout from Social Security Administration.
 - Most recent completed tax return (Form 1040).
 - Notarized letter stating the applicant family has no income.
- The DYS Scholarship Committee will consider scholarship applications completed with all necessary documentation and received by the deadline.
- Scholarship application approval will be based on verification of financial need.
- Scholarships will be provided on a first-come, funding and space available basis.
- The parent, guardian or head of household will be notified in either case of a scholarship being awarded or not.
- Incomplete applications will automatically be denied.

Qualifications

Please provide all information required to help DYS determine qualifications. Scholarship consideration will be given to eligible youth meeting one or more of the criteria below. The more information you can provide us, the better able we will be to determine hardship. A written request is required.

- Provide proof of income as described in the section above (Process).
- Receive assistance from programs such as: Food Stamps, Medicaid, SSI, Foster Care, WIC, etc. (must provide written documentation of participation in these programs).
- Provide recommendation by school representatives, social worker, youth community center workers or other social services representatives.
- Living in a single parent home.
- Financial Hardship Statement: provide a written statement of immediate financial hardship
 explaining the current situation. DYS recognizes that a family may not be receiving formal
 assistance from the programs mentioned above, yet financial assistance may still be needed to
 participate in a DYS Program. In these instances, the DYS Scholarship Committee will consider
 the Financial Hardship Statement to determine scholarship eligibility. Please provide
 documentation that supports the facts in your financial hardship statement.

CONFIDENTIALITY

Denison Youth Sports will use the information on the application only to decide if your athlete qualifies to receive a scholarship for eligible programs. Confidentiality will be maintained at all times. Applicants are guaranteed that personal finances will not be discussed outside of the DYS Scholarship Committee. Managers, assistant coaches, or other volunteers will not be informed of a participant's financial or scholarship status.

***Please note: Approval of a scholarship does not register the participant in the program. You must still register the athlete in the program desired by the registration deadline.

Denison Youth Sports does not discriminate based on gender, race, class, economic status, ethnic background, sexual orientation, physical ability, or cultural and religious backgrounds.



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Please complete the following information, one (1) application per child.

ATHLETE INFORMATION			
Name:	Age: Birth Date: _	() Male/()	Female
Address			
Street	City	State	Zip
School Attended:	Grade:	School Phone:	
Athlete lives with: () Both Par	rents () Mother () Father () Other		
PARENT / GUARDIAN INFO	PRMATION		
Parent/Guardian Name:	Em	ail Address:	
Address			
Street	City	State	Zip
Telephone:	(home) (r	mobile)	(work)
Total Household Annual Incor	me: \$	_	
Does your child qualify for fre	ee or reduced school lunch? () Y	′es()No	
Number of dependent children	n in your household during the last	tax year:	
Number of people in your hou	sehold total:		
	e or federal financial assistance?	. , , , ,	
If yes, what type?			
If you receive state or federal	financial assistance, is this your so	ole source of income?	() Yes () No

PREVIOUS PARTICIPATION

Has athlete participated in programs at DYS i	n past seasons? ()Yes ()No
If yes, list seasons and years (e.g. Spring 201	9):
Has athlete received scholarship from the DY	S in the past calendar year? () Yes () No
_	AND CONDITIONS e adult scholarship applicant. Initial each line.
1. By signing this form I certify that the incorrect to the best of my knowledge.	nformation contained in this scholarship application is true and
2. By signing this form I agree to be boun application if I receive a scholarship.	nd by the responsibilities and expectations set forth in this
3. I understand that members of the Deni scholarship application on a case-by-case basis	ison Youth Sports Board of Directors consider each s.
4. I understand that no guarantee of assis awarded if funds and space are available, and s	stance is implied by this application and scholarships are scholarship requirements are met.
5. I understand that I am responsible for a fees) required for my child's participation in a pro-	all equipment and additional/optional fees (e.g. tournament rogram.
•	vill not be paid to the individual recipient, nor will any money be as are provided via a discount code used for online
inaccurate, Denison Youth Sports may immedia	ovided during the scholarship application is deemed ately terminate my child's privilege to benefit from the mation was intentionally false, I will repay to Denison Youth d.
8 hours, per scholarship recipient, to be compl	arded to my child or multiple children, I am required to volunteer leted during the season unless otherwise coordinated with the condition will disqualify me, my child(-ren), and my immediate arship for a period of 12 months.
9. I understand it is my responsibility to e practices and games.	nsure my child(-ren) attend at minimum 80% of all scheduled
10. This application is considered private Scholarship Committee.	and will not be shared with anyone other than the DYS
Printed Name of Adult Applicant	Signature of Adult Applicant
Name of Scholarship Athlete	Date

Denison Youth Sports

www.denisonyouthsports.net

board@denisonll.net

Fill out this completed form, completed terms and conditions, and send via regular mail or email (scan completed forms and supporting documents and email to board@denisonll.net) to DYS with one or more of the following attachments; indicate those items being provided by checking applicable boxes below:

following attachments; indicate those items being provided by checking applicable boxes below:
□ Written/Request from Parent/Guardian (*required).
□ Proof of income (see Process).
$\hfill \square$ Documentation showing receipt of assistance such as Food Stamps, Medicaid, SSI, Foster Care, WIC, etc.
□ Written recommendation by school representatives, social worker, youth community center workers or other social services representatives.
□ Financial Hardship Statement with supporting documentation.
□ Other (<i>explain in detail</i>):