

Recreation Scholarship Application

2008



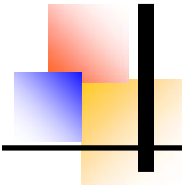
The City of SeaTac offers scholarships for our recreation programs to low-income residents of SeaTac, from toddlers to teens, to participate in educational and recreational activities offered through the SeaTac Parks and Recreation Brochure. If you have questions regarding this application, please contact Colleen Brandt-Schluter, Human Services Coordinator, at 206.973.4815. Language assistance is available upon request.

CITY OF SEATAC

4800 South 188th Street
SeaTac, WA 998188-8605

Phone: 206.973.4815
Fax: 206.973.4819
Email: cbschluter@ci.seatac.wa.us





CITY OF SEATAC RECREATION SCHOLARSHIP

PROGRAM GUIDELINES

1. Applicant must qualify under the HUD Income Guidelines – worksheet on next page. Fee assistance provides partial funding and will be available to applicants at 75%, 50% and 25% levels, depending on the average gross monthly income.
2. Assistance is for participants ages 3 to 19 who are City of SeaTac residents. All children in an approved household are eligible.
3. Assistance is limited to one activity per participant per quarter.

<u>Quarter</u>	<u>Months</u>	<u>\$ Limit</u>
Spring	Mar-May	\$200
Summer	June-Aug	\$600
Fall	Sept-Nov	\$200
Winter	Dec-Feb	\$200

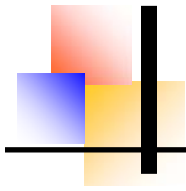
4. Approval of fee assistance does not automatically register the person into the program. The Recreation “Registration Form” must be completed and the balance of program fees must be paid at the time of registration.
5. Fee assistance is dependent upon funding availability. Assistance will be allocated on a first-come, first-serve basis as participants register for recreation programs.
6. Proof of residency will be required at the time of registration and mid year.

APPLICATION PROCESS

To apply for a scholarship, please complete the attached application and provide the necessary documentation, sign your name and return the application to the Human Service Coordinator located at SeaTac City Hall at 4800 S. 188th St. For confidential assistance, please contact Colleen Brandt-Schluter/Human Services Coordinator at 206.973.4815 or come to the third floor, City Managers Office, SeaTac City Hall.

- Eligibility is good from March 1, 2008 through February 28, 2009.
- The information provided on the application form is confidential and will be used only to determine eligibility.
- Please allow three weeks for determination and fee assistance level.
- A letter confirming eligibility will be sent to you along with instructions on how to schedule an appointment with recreation staff to register for programs.
- Applicant must complete application each year.

Please provide all requested information. An incomplete application will not be processed.



INCOME WORKSHEET – Must be completed:

Gross per Month – use the following to determine total monthly household income/support.

Monthly household income means all income of all household members: wages, salary, social security, public assistance, child care assistance, unemployment, insurance, child/spouse support, pension/retirement, and all other sources of income.

Paycheck	\$ _____
Unemployment	\$ _____
Social Security	\$ _____
Child/Spouse Support	\$ _____
DSHS (Welfare, TANF, WIC etc.)	\$ _____
Other	\$ _____
TOTAL	\$ _____

HUD INCOME GUIDELINES – KING COUNTY			
Effective 2008			
FAMILY SIZE	VERY LOW-INCOME	LOW-INCOME	MODERATE INCOME
1	\$17,100	\$28,500	\$43,050
2	\$19,500	\$32,550	\$49,200
3	\$21,950	\$36,650	\$55,350
4	\$24,400	\$40,700	\$61,500
5	\$26,350	\$43,950	\$66,400
6	\$28,300	\$47,200	\$71,350
7	\$30,250	\$50,450	\$76,250
8	\$32,200	\$53,700	\$81,200
FEE ASSISTANCE	75%	50%	25%

Applicant's Name _____

Applicant's Address _____ City _____ Zip Code _____

Day Phone _____ Evening Phone _____

Total household monthly gross income: \$ _____

Note: Please attach a copy of your most recent Federal Income Tax Return Form and two of your most current pay stubs for verification of income and dependents.

Total number of adults living in household _____

List name and ages of children, 19 and under at the address above and the program(s) they may be interested in.

Name	Age	Interested Programs	Examples of Programs
			<ul style="list-style-type: none"> • Preschool (3-5 yrs) • Youth Summer Camp (K-6th) • Youth Childcare (5-12 yrs) • Youth Classes (2-19 yrs) • Teen Programs (12-19 yrs) • Teen Summer Camp (Grades 7-9)

I certify that all of the information on this application is true and correct and that all income is reported. I understand that this information is being given for the receipt of fee assistance; that city officials may verify the information on the application; and that deliberate misrepresentation of the information may subject me to prosecution under the applicable State and Federal laws.

Signature _____ Date _____

FOR HUMAN SERVICE COORDINATOR USE		
Approved _____	Denied _____	
% _____		
Processed by _____	Title _____	Date _____