**CITY OF LARAMIE**
**PARKS & RECREATION DEPARTMENT**
Recreation Division
P.O. BOX C
LARAMIE, WY 82073

(307) 721-5269
FAX (307) 721-5284
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# Partial Scholarship Application

Effective Date September 1, 2012

**General Scholarship Guidelines - If you have any questions please call 307-721-5269**

- Awarded to children, youth, adults, and seniors under the approved scholarship guidelines.
- Scholarship considerations are based on family income/financial need, family size, and highly extenuating circumstances. **Proof of this information (copies of prior year W-2 forms, payroll check stubs, college financial award letter, loans, child support, grants, alimony, birth certificates, and other relevant documentation) will be required as proof of the above-mentioned information.** All information will be kept strictly confidential.
- Completing an application is not an automatic assurance of a scholarship award.
- All scholarship applications must be delivered to the Parks & Recreation office, PO Box C, Laramie, WY 82073.
- Income guidelines are based on the Wyoming Department of Family Services guidelines and are listed below.

**Recreation Center Multi-Pass Scholarship Guidelines**

- Scholarship recipients will receive one (1) multiple pass good for 20 daily visits to the Recreation Center each recreation season (Winter/spring, Summer, and Fall).
- Scholarship recipients must pay 30% of the applicable multiple pass fee for their age group.

**Activity Scholarship Guidelines**

- All recreation activity scholarships are partial awards, covering 50% of the activity registration fee, with the total award not to exceed $50.
- Scholarship may be applied for at any time. However, Activity Scholarship awards will be limited to a total amount not to exceed $150 per any twelve (12) month period of time per individual.
- If a scholarship recipient finds that they are unable to attend the registered activity, it is the recipient's responsibility to notify Parks & Recreation staff to cancel at least 3 working days prior to the start date of the activity.
- If a scholarship recipient cancels an awarded class, the scholarship cannot be transferred to another program and the amount of the scholarship awarded will be counted towards the $150 maximum allowed in a twelve (12) month period. Refund of the fee portion paid by the scholarship recipient will be processed and refunded within 3 weeks of notification.

| Household Size | Monthly Income Eligibility For Scholarship Awards |
|---|---|
| 2 | ≤$3,783 |
| 3 | ≤$4,773 |
| 4 | ≤$5,763 |
| 5 | ≤$6,753 |
| 6 | ≤$7,743 |
| 7 | ≤$8,733 |
| 8 | ≤$9,723 |

## I. Family Information

Please list all household members living in the home, and the activity number(s) for which this scholarship application applies. **(Please note "Multi-Pass" for activity number if applicable.)**

| All Household Member Names | Age | Activity Name & Number or Pass Type |
|---|---|---|
| | | |
| | | |
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## II. Income

Please list previous year total annual or monthly income reported on payroll check-stub, W-2 forms, college grant, scholarship, loan information; and any other income and attach proof of income. **(Without proof of income attached, your application cannot be processed.)**

_____

_____

_____

**(Requires verification by 2 staff members if proof of income is not kept on file. _____/_____)**

## III. Additional Information

Please provide any other information that would be helpful in considering this application.

_____

_____

_____

_____

_____

**Applicant Signature:** _____ **Date:** ____/_____/___

**Address:** _____**Phone** _____

_____

**Fees Paid:** _____ **Multi-Pass or Class Name:** _____ **Date:** ___/____/___

**For Internal use only:** Class Name or Multi-Pass Type_____

Scholarship Award Decision _____ Approved (initial) ____/_____/___ Date

_____ Denied* (initial) ____/_____/___ Date

Date of notification of Approval/Denial ____/_____/___
Applications will be destroyed 30 days after notification of approval if incomplete or payment is not received.
Amount Due: _____
*Reason for denial_____
_____