



Foundation Scholarship Program
Explanation of Benefits



Dear Applicant:

As in the past, eligibility for assistance is based upon family size, income levels and extenuating circumstances. After reviewing your application based upon the above three factors, the following policies will be implemented:

- 1. Each family will be assigned a percentage of assistance: 25%, 50%, 75% or 100% depending on the information you provide us.
2. Each family's percentage of contribution must be paid prior to the application of aid and prior to the use of programs and/or facilities.
3. Each family will be allowed to register for one program per season per family member conditionally.
4. Please fill out a corresponding registration card or facility pass card for consideration.

Seasons are designated as follows:

Table with 3 columns: Season, Registration Begins, Program Meets. Rows include Winter, Spring, Summer, and Fall with corresponding dates.

Camp programs will be advertised in either the Winter or Spring brochure and will count towards the summer season.

Please make sure you have turned in all required documentation (please see attached requirements) and allow 15 business days for processing. The park district encourages you to return your information at your earliest convenience. If you have any questions, please contact Carmela Fioretto at 847-885-7500.

Hoffman Estates Park District Foundation Scholarship Application Guidelines

Foundation Scholarship Policies:

1. Scholarship applications need only be completed **once** annually. **Information on this form will be kept on file until December 31st and any changes to financial status must be reported promptly by the applicant to the Park District.**
2. All scholarship recipients must reside within Park District Boundaries.
3. All information submitted is confidential and is not a matter of public record.
4. All information on the Scholarship application must be true and accurate.
5. Limited funds are available for grants. All Scholarship awards are based on the need and availability of Scholarship funds at the time of applying. Each family will be allowed to register for one program per season per family member.
6. Upon submission of grant request, families will be notified in 15 business days or less of their grant status. Registration and/or facility pass cards should be submitted with the initial grant request and then solely for future seasonal requests.

Application Procedures:

1. Complete, in full, the Scholarship Assistance Application. Families applying must submit a **copy** of their **latest federal income tax return, W-2s from each adult wage earner and a copy of the most recent pay stub from each wage earner.**
2. Return your completed application to the Hoffman Estates Park District, 1685 W. Higgins Attention: Office Manager
3. Each application will be reviewed and the information verified for the family's eligibility. Based upon family size, income level and extenuating circumstances, families may be denied or approved and an established percentage of coverage will be determined that will remain the same for the year providing the financial circumstances do not change.
4. If approved, you will be eligible for assistance until December 31st of that year.

Your Scholarship allows you to register for one of the following per season:

- Recreation Classes
- Camps
- Seascape Punch Passes
- In-House Youth Leagues
- Preschool

Your Scholarship **cannot** be used for

- Facility Memberships without extenuating circumstances
- Travel Program additional costs
- Adult Leagues

How to Register:

- All registration procedures and policies as detailed in each of the district's program brochures apply to Scholarship recipients.
- Initially:
 - Complete the Scholarship forms along with the registration and/or facility pass card.
 - Include no payment with your initial request. You will be contacted with the results of your request and given your percentage of contribution at that time.
 - Upon receipt of your payment, if any is required, you can be registered for the program requested depending on availability.
 - Your initial request can take up to **15 business days to process.**
- **For future registration:**
 - Fill out Scholarship cover page only.
 - Fill out the registration and/or facility pass card.
 - Include your percentage of contribution. If you are unsure of your percentage, please contact the Hoffman Estates Park District at 847-885-7500 Monday through Friday from 8:30 a.m. to 4:30 p.m. and speak with Carmela Fioretto. Please note, your percentage of contribution is due at the time you request additional registration.
 - Additional requests will take up to **24 hours to process.**

**HOFFMAN ESTATES PARK DISTRICT
FOUNDATION SCHOLARSHIP**

NEW APPLICANT

**SUBSEQUENT
APPLICATION**

Family Last Name _____

Husband's First Name _____

Wife's First Name _____

First and Last Name(s) of Children:

1. _____ Birthdate/Age: _____

2. _____ Birthdate/Age: _____

3. _____ Birthdate/Age: _____

4. _____ Birthdate/Age: _____

5. _____ Birthdate/Age: _____

6. _____ Birthdate/Age: _____

Present Address

New since last registration? Yes No If Yes: Past Address:

Home Phone _____

Work Phone: Wife (Mother) _____

Husband (Father) _____

Marital Status: Single Married Divorced Separated Widowed

FINANCIAL RESOURCES

In order to be considered for review of Scholarship, it is required that you submit 3 of the most recent pay stubs from each wage earner in your household. Each pay stub must show the year-to-date income or it will be returned and your application will not be reviewed at that time.

Please complete the following:

First and Last Name: _____

Employer's Name: _____

Employer's Address _____

Employer's Phone # _____

Gross Yearly Income for year _____ \$ _____

First and Last Name: _____

Employer's Name: _____

Employer's Address _____

Employer's Phone # _____

Gross Yearly Income for year _____ \$ _____

First and Last Name: _____

Employer's Name: _____

Employer's Address _____

Employer's Phone # _____

Gross Yearly Income for year _____ \$ _____

Please review the following and list any information that would pertain to your household:

- Do you receive Public Assistance: \$_____ Month
- Do you receive Alimony: \$_____ Month
- Do you receive Child Support: \$_____ Month
- Do you receive Unemployment Compensation \$_____ Month
- Do you receive Social Security Benefits: \$_____ Month
- Do you receive Death Benefits: \$_____ Month
- Home Own/Rent \$_____ Month
- Car(s) Own/Rent \$_____ Month
- Other Expenses (Medical/Health Insurance) \$_____ Month
- _____ \$_____ Month

ADDITIONAL AND EXTENUATING CIRCUMSTANCES _____

I fully understand that the financial and extenuating circumstances outlined above will be kept confidential by the Hoffman Estates Park District. Furthermore, I understand that it is my responsibility and obligation to notify the Park District of any changes in financial status. Each wage earner must sign below.

Applicant's Signature/Date

Applicant's Signature/Date

**HOFFMAN ESTATES PARK DISTRICT
SCHOLARSHIP CHECKLIST**

Before submitting your Scholarship application to the park district, please read and check off the boxes of the documents required for your application to be processed.

- Completed Application
- A copy of the most recent Federal Income Tax Return and W-2's from **each** adult wage earner. If you have not yet filed, you are required to submit it as soon as you have a copy in hand.
- A copy of three (3) of the most recent pay stubs from **each** wage earner which **must** show your year-to-date income (any household member 18 years or older).
- Social Security Recipient Documentation
- Public Aid Recipient Documentation
- Proof of Alimony/Child Support Payments – If you are a single parent and claim you do not receive child support, you must submit legal documentation stating that you do not receive it.
- Unemployment Compensation Documentation
- A photocopy of a driver's license for all heads of household listed on the application.

** Keep in mind that you need only to fill out the first page of the application along with a registration or facility card if you have already filled out a complete application and given all the required documentation. Additionally, your percentage of coverage should remain the same for the year if your financial situation has not changed.