

General Policies

How to Apply

To determine if a member of your family qualifies for a scholarship in a City of Burien Parks & Recreation Department activity, follow the instructions listed below.

- ◆ Read through the General Policies contained on this page.
- ◆ Using your household income from all sources, enter the amount on the application on the reverse side of this brochure.
- ◆ Complete the application form on the reverse side of this brochure and turn it into the Parks & Rec office. Applications will be processed according to the USDA Child Nutrition Program Income Guidelines.
- ◆ Scholarships will be issued on a 50% matching basis.

Parks and Recreation
The Benefits Art Endless™

1. The youth/teen recipient must be a resident of Burien.
2. The scholarship recipient must qualify for the Highline School District USDA Child Nutrition Program.
3. Scholarships will be issued on a 50% matching basis. Recipients are responsible for paying the balance for the registration fee.
4. Balance of registration fees are due at the time of registration.
5. Award of a scholarship does not automatically enroll recipient in a program.
6. Scholarships can only be used for City of Burien Parks & Recreation Department sponsored youth and teen activities.
7. A limit of two (2) scholarships per recipient per calendar year will be awarded.

Income Worksheet (Gross Per Month)

Paycheck \$ _____

Unemployment \$ _____

Social Security (SSI, SSA) \$ _____

Child Support \$ _____

DSHS (Welfare, WIC, etc.) \$ _____

Other \$ _____

Total \$ _____
(Enter this amount on the reverse side of this form.)

Application

The undersigned certifies, subject to the penalties of perjury, that:

1. There are _____ individuals residing in the household.
2. That for the previous month, the combined total gross income from all sources (including wages, social security, pension, unemployment, welfare, child support, alimony, and any other cash income) of all such household residents is \$_____. Proof of income for the past 3 months must be attached (such as most recent income tax return, social security statement, most recent pay stubs or unemployment checks, or other documentation).
Please complete the worksheet on the inside page of this brochure.
3. The undersigned is the head of the household requesting funds.

Parent Name _____

Address _____ City/Zip _____

Day Phone _____ Home Phone _____

Participant Name _____

Age of participant _____ Date of Birth _____

I certify that the above information is correct to the best of my knowledge. I am a Burien resident and I understand that any additional fees (i.e., balance of registration fees, supply fees) are my responsibility regardless of scholarship status.

Signature _____

| | | |
|-----------------------|--------------------------|---------------------------------|
| OFFICE USE ONLY: | | |
| Qtr/year: _____ | Bar Code: _____ | Class: _____ |
| Class Cost: \$ _____ | Scholarship Amt \$ _____ | Amt paid by Recipient: \$ _____ |
| ----- | | |
| Qtr/year: _____ | Bar Code: _____ | Class: _____ |
| Class Cost: \$ _____ | Scholarship Amt \$ _____ | Amt paid by Recipient: \$ _____ |
| Staff Approval: _____ | Date: _____ | |

City of Burien

Parks, Recreation &
Cultural Services
Department

Recreation Scholarship Program



Youth & Teen Programs

Parks and Recreation
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