# CLSF Scholarship Program 2022-23 season

Financial scholarships are awarded on the basis of financial need and availability of the CLSF Scholarship Program. Scholarship applications that are not completed in full WILL NOT be reviewed. Please contact Kristian Rockall at <u>krockall@clsf.org</u> or 815.861.2715 if you need assistance completing or have questions regarding this application.

Financial Aid recipients are required to sign the CLSF Scholarship financial agreement in which the family agrees to be responsible for any non-covered fees and/or payment plans set up between the individual and CLSF. In addition, monies are directly transferred to CLSF from the Scholarship Program. No monies will be directly awarded to recipients.

\* Required

Player/Child's Information

- 1. Player's Legal First Name \*
- 2. Player's Legal Last Name \*
- 3. Gender \*

Mark only one oval.



🔵 Girl

4. Player's Date of Birth \*

Example: January 7, 2019

- 5. Player's Home Address \*
- 6. Player's Cell Phone Number
- 7. Current School Attending
- 8. Grade child will be in Fall 2022 \*

Check all that apply.

1st
2nd
3rd
4th
5th
6th
7th
8th
9th
10th
11th
12th

## Parent/Guardian 1 Information

9. Parent/Guardian 1 First and Last Name

10. Parent/Guardian 1 Email

- 11. Parent/Guardian 1 Home Phone
- 12. Parent/Guardian 1 Cell Phone
- 13. Parent/Guardian 1 Address (if different from player's address)

Parent/Guardian 2 Information

14. Parent/Guardian 2 First and Last Name

- 15. Parent/Guardian 2 Email
- 16. Parent/Guardian 2 Home Phone (if different than Father's)
- 17. Parent/Guardian 2 Cell Phone
- 18. Parent/Guardian 2 Address (if different from player's address)

# Additional Information

19. Select your total gross income earned by ALL heads of household last year (2020) \*

Check all that apply.

- Under \$25,000
- \$25,002-\$50,000
- Over \$50,000 (If you select over \$50,000, please fill in the actual family income below)
- 20. Specific total gross income if over \$50,000

- 21. Number of children (under age 18) in the player's household
- 22. How many people are supported by your household income? \*

Mark only one oval.



23. If Parents are divorced/separated, is the other parent (not residing at player's address) also financially responsible for the player? Please note that income from ALL adults responsible financially for the player must be included for consideration in this application.

Check all that apply.

Yes
No
Not Applicable

24. The following documents are acceptable as verification of your household income. Please indicate which you are providing as part of your application; a minimum of one (1) is required for application to be considered complete and CLSF Scholarship Program retains the right tc request further documentation after application review.

#### Check all that apply.

Current Proof of Eligibility for Free or Reduced Lunch Program

Current Proof of Eligibility for Woman Infant and Children Program (WIC)

Current Proof of Eligibility for Temporary Assistance to Needy Families Program (TANF)

Current Proof of Eligibility for Food Stamps

Previous years' US Federal Tax Return (Form 1040), first page only and please BLACK OUT any social security numbers before sending

\*Feel free to submit IN ADDITION TO above description of any circumstances that should be considered by CLSF Scholarship Program Committee

### Agreements

25. I certify that all the information on this application is true and correct, that all required financ documents are attached, and that all income is reported.

Mark only one oval.

$\square$	$\Big)$	Yes
$\square$	)	No

26. I understand that after review of my application, the Financial Aid Committee may determine that I am responsible for a portion or possibly full payment of the annual player fee for recreational/travel soccer. After CLSF Scholarship Fund Committee notifies me of the amou of aid I will receive, I will need to contact the Chairperson within 48 hours to accept or declin the offer to play.

Mark only one oval.

$\subset$	$\supset$	Yes
$\subset$	$\supset$	No

27. I hereby apply for a CLSF Scholarship to go towards fees for the player listed above. I understand that scholarships are awarded only when funds are available. Pending approval of this amount, I will complete the CLSF Registration process. I understand that this scholarship is available only for the current season and that the player and family will abide by CLSF guidelines, rules, and codes of conduct. Should my child decide to stop playing during the season for any reason, any unused portion of scholarship funds will be returned to CLSF Scholarship Program account. I further understand that should the Scholarship Committee become aware of any falsified information on this application, scholarship monie will be forfeited and returned to the CLSF Scholarship Program account understand that applying for financial aid does not automatically grant me a scholarship or placement on a particular team. I certify that the above information is correct and true to the best of my knowledge.

Mark only one oval.

$\square$	)	Yes
$\square$	)	No

# 28. Parent/Guardian Signature

29. Date

Example: January 7, 2019

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https://docs.google.com/forms/u/0/d/1kmR3Aiim-Rqy7Dr7h6c-1b5Q0UyE3KJ1rVLj1y5ckr4/printform