FEE SCHOLARSHIP ELIGIBILITY FORM

Blaine-Birch Bay Park and Recreation District

Birch Bay Activity Center
7511 Gemini Street
Blaine, WA 98230

(360) 656-6416
info@bbbprd2.com
bbbparkandrec.com

INDIVIDUALS OR FAMILIES MUST MEET THE FOLLOWING CRITERIA TO QUALIFY FOR SCHOLARSHIP ASSISTANCE

Eligible applicants include adults or children from families who:

- Reside within the Blaine School District boundaries (proof of residency is required); and
- Qualify for SNAP (food stamps), TANF, are foster children, free or reduced-price meals under the USDA National School Lunch Program income guidelines.

The District reserves the right to grant scholarships in cases of demonstrated financial hardship that do not strictly meet the established income guidelines.

APPLICANT / HEAD OF HOUSEHOLD

Applicant/Head of Household		
Spouse/Partner		
Address	City	Zip
Home / Cell Phone	Email	Alt Phone

DEPENDENT INFORMATION – PLEASE LIST EACH DEPENDENT SEPARATELY

First and Last Name of Dependent(s)	*Sex*	*Date of Birth*	*Age*	*Grade*

SCHOLARSHIP PROGRAM/ACTIVITY REQUEST

Program/Activity Name	*Organization Providing Program/Activity (BBBPRD2, Blaine Youth Sports, Blaine Soccer Club, etc.)*	*Date(s) or Season Requested*

I hereby certify that all the information provided in this application is true, complete, and accurate to the best of my knowledge.

Signature of Adult Household Member *Date*

ELIGIBILITY CRITERIA

FOSTER CHILDREN: Foster children are eligible for scholarships regardless of the foster family's household income. To verify eligibility, a letter from the child's caseworker must be submitted stating the child's name and confirming that the child is a ward of the state.

TANF/FOOD STAMP BENEFITS: Families receiving Temporary Assistance for Needy Families (TANF) or SNAP benefits are eligible. As proof of eligibility, applicants must submit an approval notice from the Department of Social and Health Services (DSHS).

FREE / REDUCED-PRICE SCHOOL MEALS: Families receiving free or reduced-price meal benefits must submit an approval notice from the Blaine School District.

FOR OFFICE USE ONLY: Blaine Resident ☐ Address Verified ☐ Free/Reduced Lunch ☐ SNAP (food stamps) ☐ TANF ☐

Verified By: _____ Title: _____ Date: _____

Approved By: ☐ _____ and _____ Date: _____

Scholarship Awarded: _____

Denied: ☐ Reason: _____