



Charlotte Recreation Scholarship Application

Name: _____

Address: _____

Email: _____ Phone: _____

Monthly Gross Income: _____

Number of People in Household: _____

Do you qualify for reduced or free lunch program: _____

Have you received a scholarship in the last year: _____

Scholarship Assistance Request for:

Participants Name: _____

Program/Activity: _____

Amount Requesting: _____

Participants relationship to Applicant: _____

Briefly describe your financial reasons for requesting a recreation scholarship:

I hereby certify that all of the above information is true and correct. I understand deliberate misrepresentation will result in denial of eligibility for the recreation scholarship.

_____ Signature of Applicant _____ Date

Approved Denied Amount Awarded: _____

By: _____ Date: _____