

# Financial Assistance Program

Granger Parks and Recreation  
 2200 Walnut Street Granger, IA 50109 515.999.2140

**Purpose:** To provide assistance to qualifying children in the Woodward-Granger District to help pay for recreation activity fees. The program is intended to open up participation opportunities by reducing financial obstacles for those who may not be participating because they may not be able to afford to pay the registration fee.

**Guidelines:**

- \* For participants up to and including grade seven
- \* Complete application once per year, unless financial status changes
- \* Maximum of \$200/participant/year with a \$600 cap/family
- \* Only students of the Woodward Granger School District are eligible
- \* Participants must pay any fees due at time of registration - no payment plans
- \* Giving false or incorrect information on the application form will deny a family from receiving any additional financial assistance from this program
- \* Must agree to fully cooperate if application is chosen for a verification audit

**Participation Requirements:** Participation will be monitored. Those who attend less than 75% of the practices-games and/or classes will be ineligible for additional funding for 1 year.

*Income Eligibility Guidelines - Effective July 1, 2015 through June 30, 2016*

ALL INCOME BEFORE DEDUCTIONS						
Household Size	\$5.00 fee			Reduced (1/2 price)		
	Yearly	Monthly	Weekly	Yearly	Monthly	Weekly
2	20,709	1,726	399	29,471	2,456	567
3	26,117	2,177	503	37,167	3,098	715
4	31,525	2,628	607	44,863	3,739	863
5	36,933	3,078	711	52,559	4,380	1,011
6	42,341	3,529	815	60,255	5,022	1,159
7	47,749	3,980	919	67,951	5,663	1,307
8	53,157	4,430	1,023	75,647	6,304	1,455
For each additional member	5,408	451	104	7,696	642	148

Parents: If your total household income is within the limits listed above, your children may be eligible for reduced registration fees.

Eligible Programs: Included, but not limited to, are Bam bam, basketball, flag football, volleyball, soccer, etc.

# Granger Parks and Recreation

## Statement of Eligibility for Youth Scholarship Program

NOTE: Information on this form will be kept confidential.

Head of Household Information: (please print) Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: Cell # : \_\_\_\_\_

Email: \_\_\_\_\_

**Application Information:**

- 1) I declare that there are \_\_\_\_\_ Adults and \_\_\_\_\_ children in my household.
- 2) I declare that the combined gross income (earned and unearned) of all persons in my household is:  
\$ \_\_\_\_\_ per \_\_\_\_\_ (week, month, year)

**Agreement Items:**

- 1) Bring in a copy of your last year's federal income tax return or your most current paycheck stub.
- 2) Reportable income includes: Commissions, Worker's compensation, Interest, Welfare payments, Adoption subsidies, Strike benefits, Alimony, Unemployment compensation, Annuities, Supplemental security income (SSI), Income from self-employment, VA Benefits, Dividend income, Social Security, Retirement income, Disability benefits, Pensions, Child support payments.
- 3) I understand that services received under this program are not to be sold or exchanged.
- 4) I am aware of and fully understand the guidelines and program participation requirements listed on the reverse side of this application form.

Name of Participant: \_\_\_\_\_ Grade: \_\_\_\_\_

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Signature of Applicant: \_\_\_\_\_

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**For City Use Only:**

(Circle application)

Action:             Approved or Denied

\$5.00 or Reduced

By: \_\_\_\_\_

Date: \_\_\_\_\_