



# Ypsilanti Township Recreation Department Scholarship Program

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## Agreement:

Ypsilanti Township Recreation has awarded a scholarship in good faith to:  
\_\_\_\_\_ Family.

As the recipient of a scholarship, I agree to the following:

- I will be on time to all classes and/or meetings.
- I will participate to the fullest extent of my abilities in all activities included in my selected program.
- I will know and adhere to all Ypsilanti Township Recreation rules.
- I will be respectful of my instructors/staff, myself and other students in the program.
- I will be a model of effort and behavior for other participants and patrons of the Ypsilanti Township Recreation Department.

I understand that if I fail to complete any of the above, my scholarship may be revoked.

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Recipient's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Recipient's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Recipient's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Recipient's Signature \_\_\_\_\_ Date \_\_\_\_\_

I, the parent or guardian of the above recipients, will do my best to make sure the scholarship recipients adhere to and complete the requirements listed and understand that failure to complete any of the above may result in the scholarship being revoked.

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Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_



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**Applications should be submitted a minimum of two weeks prior to the requested Programs start date.**

Name of Child (1): \_\_\_\_\_ Age: \_\_\_\_\_ Program: \_\_\_\_\_

Name of Child (2): \_\_\_\_\_ Age: \_\_\_\_\_ Program: \_\_\_\_\_

Name of Child (3): \_\_\_\_\_ Age: \_\_\_\_\_ Program: \_\_\_\_\_

Name of Child (4): \_\_\_\_\_ Age: \_\_\_\_\_ Program: \_\_\_\_\_

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

(Street)

(City)

(Zip)

Parent/Guardian's Name: \_\_\_\_\_

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

Number of household members UNDER 18 years of age: \_\_\_\_\_

Number of household members OVER 18 years of age: \_\_\_\_\_

**Please provide the following information for all adults within the household to be considered for scholarship.**

- Most recent W2
- Completed application
- Signed scholarship agreement (one per year applying)

Please provide a statement of reasons for applying for assistance:

\_\_\_\_\_

Have you ever received an YTRD scholarship in the past? \_\_\_\_\_ If so, when: \_\_\_\_\_

**Scholarships will be distributed on a case-by-case basis with a household limit of no more than \$250 per calendar year per student..**

I/We, the undersigned, understand that the information given will be kept confidential. The information provided is true and complete to the best of my knowledge and belief. I consent to the disclosure of such information for purposes of income and verification related to my/our application for financial assistance. I understand that any willful misstatement of material fact will be grounds for disqualification. *I/We agree to pay any outstanding balance I have on my household account after all scholarship money has been applied.*

Applicant's Signature

Date



# Ypsilanti Township Recreation Department Scholarship Program

## Eligibility

To apply for financial assistance, please read the following information, complete the attached application form, and provide copies of all required documentation.

- Must be an Ypsilanti Township Resident to apply.
- Proof of Ypsilanti Township residency must be provided in the form of a state issued ID.
- Scholarship is for children aged 3 - 17.
- Scholarships awarded may cover up to 50% of each registration cost.
- A new scholarship application with documentation is due each season your child/ren plan to participate.
- Applicants are not allowed to participate in the requested program until after their scholarship is approved or full payment is received.
- Scholarship applicants will receive verbal or written notice 5-7 business days after the application has been processed.
- If approved the scholarship will be valid for the calendar year of the date of submission.

## Scholarship Eligibility Guidelines

### 2020 Federal Poverty Guidelines (FPL) Monthly Income Levels

PERSONS IN HOUSEHOLD	POVERTY GUIDELINE
1	\$12,760
2	\$17,240
3	\$21,720
4	\$26,200
5	\$30,680
6	\$35,160
7	\$39,640
8	\$44,120
For families with more that 8 persons, add \$4,480 for each additional person.	

All information submitted will remain confidential.

Applications should be mailed to Ypsilanti Township Recreation Department, 2025 E. Clark Rd. Ypsilanti, MI 48198 or emailed to [jhines@ypsitownship.org](mailto:jhines@ypsitownship.org)