

Killington Parks & Recreation
Scholarship Application
(To be completed by Parent or Guardian)

Program you are applying for: _____

Applicant Name: _____
 Participants Name: _____
 Address: _____ City: _____
 Zip: _____ Phone: (day) _____ (evening) _____
 E-mail: _____

Please list all **immediate family members** in your household below. Immediate family members include only parents and children. This does **NOT INCLUDE** grandparents, grandchildren, cousins, aunts, uncles, etc.....

Number in family residing at above address: _____

Name	Birth Date (month/year)	Name	Birth Date (month/year)

Total GROSS Household Income: \$_____ Per year or summer month income? _____

- Income is calculated on gross income (before deductions from taxes, insurance premiums, union dues, employee's social security taxes and other employee deductions). Income includes net income from self-employment, social security, public assistance, alimony, child support payments, pensions, regular contributions from people not living in same household, monetary compensation for services such as wages, salary, and commission for fees and other cash income.
- *You may be asked to provide documentation in a form of Annual Tax Return, W2 Form, DSS Form, SSI Form, Social Security or Unemployment Annual Statements***

Scholarships are figured on a sliding scale as based upon the Standard Federal Income Guidelines. This has been modified from our original policy based on increased number of families needing assistance. Thank you for understanding our new requirement and methods as we attempt to create a fair system for all persons to have equal access to our programs.

I affirm to the best of my knowledge that the above information is true and complete. I understand that my information is confidential and will only be reviewed and kept on file (up to 3 years) by the Recreation Director to determine eligibility. A deliberate misrepresentation of the information will result in forfeiture of the scholarship and may prohibit future eligibility in the Town of Killington Scholarship Program.

Signature: _____ Date: ____/____/____

Name Printed: _____ Date: ____/____/____

Scholarship Information

- Scholarships are available to Rutland and Windsor County residents ONLY! Program fees may be discounted 25%, 50% or 75%. All applicants information is kept confidential. Class instructors and program leaders are not informed of participant’s scholarship status.
- Scholarships apply to most programs or activities with the following exceptions:
 - Facility/Field Rental Fees
 - Late Fees
 - Program Fees of \$10.00 or Less
- Applicants will be notified within 5 business days regarding their reduced fee status.
- Once approved, the reduced program fee must be paid within 3 days of award notice or call in order to participate in any class, activity or program. Classes or programs that are full or cancelled may not be available regardless of scholarship status.
- **The scholarship application will not hold a reservation for any class, activity or program with limited registration spots. The registration is not completed until after the scholarship is approved and the balance is paid in full. The scholarship application must be completed at least 3 business days before the deadline, in order to insure that the applicant may have a chance to pay the balance in full, which must be before the deadline.**

Killington Parks & Recreation Scholarship Sliding Scale

Annual Income	Single Individual	Two Member Household	Three Member Household	Four Member Household	Five Member Household
\$0-\$10,900	75%	75%	75%	75%	75%
\$10,901-\$14,600	50%	75%	75%	75%	75%
\$14,601-\$15,540	50%	50%	75%	75%	75%
\$15,541-\$18,400	25%	50%	75%	75%	75%
\$18,401-\$20,800	0%	50%	50%	75%	75%
\$20,801-\$22,200	0%	25%	50%	75%	75%
\$22,201-\$26,600	0%	0%	50%	50%	75%
\$26,601-\$29,700	0%	0%	25%	50%	50%
\$29,701-\$31,500	0%	0%	0%	50%	50%
\$31,501-\$33,500	0%	0%	0%	25%	50%
\$33,501-\$37,000	0%	0%	0%	0%	50%
\$37,001-\$42,300	0%	0%	0%	0%	25%
\$42,301-\$47,600	0%	0%	0%	0%	0%

Internal Use Only:

Date received: _____

Scholarship Meeting Needed: YES NO Date: _____

Approved % of Reduction for Scholarship _____% or \$ _____

Meeting/Scholarship Notes: