



# Town of Sudbury

## Park & Recreation Department

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Park and Recreation Department  
40 Fairbank Road  
Sudbury, MA 01776  
978-443-1092

### SCHOLARSHIP APPLICATION

Scholarships are intended to assist people who desire to attend Park and Recreation programs but are not able to due to the lack of funds. Scholarship help is targeted to those who have an individual request, but are not limited to one per family. All scholarship applications will be reviewed by Park and Recreation staff on a case-by-case basis. Submitting the application does not guarantee that a scholarship will be granted.

#### I. CHILDS INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade: \_\_\_\_\_ Gender: Male/Female

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

Home Phone: \_\_\_\_\_ Parent Work/Cell Phone: \_\_\_\_\_

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

#### ***Sudbury Summer Camp***

- Scholarships are issued for one session of camp per person.

#### ***Other Programs***

- Partial scholarships are issued per person (each fiscal year) depending on available funds.

What Park and Recreation programs are you requesting a scholarship for?

\_\_\_\_\_

What activities (sports, clubs, other) has your child participated in during the past twelve months?

\_\_\_\_\_

\_\_\_\_\_

#### II. FAMILY INFORMATION

Persons in household:

Name	Relationship to child	D.O.B.	Occupation
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you previously received a Park and Recreation Scholarships? Yes/No

If yes, what year? \_\_\_\_\_

III. FINANCIAL INFORMATION

Total (gross) family income last year: \_\_\_\_\_

Current monthly income from wages:

Name:	Amount:
_____	_____
_____	_____

Current monthly income from other sources (including SSI, SSDI, TAFDC, child support, alimony, etc.)

Source:	Amount:
_____	_____
_____	_____

**Please note:** All application need to be submitted with income documentation. This should include all sources of income for the past 30 days (copies of pay checks, government benefits, child support, etc.)

Family Monthly Expenses:

Rent/Mortgage: \_\_\_\_\_

Car Payment: \_\_\_\_\_

Other Payments (e.g. credit cards, loans): \_\_\_\_\_

Uncovered Medical/Dental: \_\_\_\_\_

Unusual situations or expenses at this time – Please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Amount family can contribute to the cost of camp/other program: \$\_\_\_\_\_

Signature : \_\_\_\_\_

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