

Sporting Columbia SC Financial Aid Request Form

Parent Name(s): _____

Address: _____ Phone Number: _____

Email: _____

1) Please indicate family annual income by circling one of the following choices:

- a) Under \$15,000.00
- b) Between \$15,001.00 – 20,000.00
- c) Between \$20,001.00 – 30,000.00
- d) Between \$30,001.00 – 40,000.00
- e) Over 40,000.00

2) Please list the number of dependants in household: _____

3) Please list the name of the applicant. (Note: Families with multiple players will only be considered for partial aid)

Player Name: _____ Birthdate: _____

Program: Recreational U _____ Competitive U 5 _____

Player Name: _____ Birthdate: _____

Program: Recreational U _____ Competitive U _____

Player Name: _____ Birthdate: _____

Program: Recreational U _____ Competitive U _____

Player Name: _____ Birthdate: _____

Program: Recreational U _____ Competitive U _____

4) I acknowledge that I have read the Sporting Columbia SC Shaun Long Scholarship Program outline: _____ (please initial)

5) I understand that there is additional volunteer (BINGO) obligations required for competitive recipients: _____ (please initial)

6) I understand that failure to complete additional volunteer obligations will result in denial of any future aid opportunities until obligations are met: _____ (please initial)

- 7) I have attached the required financial documents in order for my application to be processed by the committee: _____ (please initial)
- 8) Please attach any additional information pertaining to the need of financial aid.

Please note:

Deadline to submit application:

Fall registrants:

July 1st for ALL recreational and competitive players

Spring registrants:

February 1st for all recreational players

Applications received without supporting documents will be considered incomplete and ineligible for consideration. Please refer to Shaun Long Financial Aid information sheet for required supporting documents.

Families with multiple players will only be considered for partial aid. Aid will be distributed based on need when comparing all applicants.

Please remit form and supporting documents to:

Sporting Columbia SC

PO Box 7506

Columbia MO 65205

ATTN: Financial Aid Committee

DO NOT EMAIL APPLICATIONS. ALL APPLICATIONS MUST BE RECEIVED VIA MAIL WITH SUPPORTING DOCUMENTS IN ORDER TO BE CONSIDERED FOR REVIEW.

Email notifications will be sent following review of all applications.

Please contact a member of the financial aid committee with any questions you may have regarding the application process. Financial Aid Committee Chair: treasurer@sportingcolumbia.net