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| Scholarship Application |  |

## Student Information

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| Student Name |  |
| Parent/Guardian Name |  |
| Street Address |  |
| City ST ZIP Code |  |
| Home Phone |  |
| Work Phone |  |
| E-Mail Address |  |

## Eligibility

### Has student completed a PowerUP! Registration Form? Yes No

### Is student eligible for Free and Reduced Lunch Program? Yes No

Is there more than one student attending PowerUP! in your household? Yes No

## Letter of Recommendation

### Please attach a letter of recommendation from your child’s teacher, church official, or community member detailing the student’s need for the PowerUP! After School Program.

## Additional Info

Please tell us why you would like to be considered for a scholarship, as well as how you think your child will benefit from the program. You may attach an extra sheet if needed.

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## Agreement and Signature

### By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if my child is accepted as a scholarship recipient, he/she must abide by all rules set forth by NMCYF in order to remain eligible for the scholarship.

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| --- | --- |
| Name (printed) |  |
| Signature |  |
| Date |  |

## Our Policy

### It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.