

Northern Nevada Youth Soccer Association

Soccer Scholarship Request

Application Checklist



Applicant's name (please print): _____

ELIGIBILITY

To be eligible for a scholarship, athletes must qualify for or be currently receiving assistance from one or more of the programs listed below (current copies submit with application):

- Free or Reduced School Lunch
- Temporary Assistance for Needy Families
- Aid for Dependent Children
- Foster Care
- Medicaid

Athletes must also meet each of the criteria listed below:

- Be a resident of Elko County
- Commit to attend a minimum of 80% of scheduled practices and games
- Not be currently served by an existing scholarship or fee waiver program

TO APPLY

- **Complete the Youth Sports Scholarship Application.** Email to info@nnysa.org
- Applications must be submitted to NNYSA. **Parents should complete the application in its entirety.**
- **Ensure that the application has been signed by the child's parent or guardian and all supporting documents signifying the child is receiving aid are attached** (see list below). If such documents are not available, a school employee, social worker, or case worker must complete the sign the bottom portion of the application form to verify eligibility. Acceptable forms of verifying documentation for the following assistance programs include:
 - **Aid for Dependent Children:** Eligibility notification letter or Scholarship form signed by school employee, social worker, or case worker
 - **Foster Care:** Social Worker Verification
 - **Free and Reduced Price Lunches:** Eligibility notification letter or Scholarship form signed by school employee, social worker, or case worker
 - **Medicaid:** Copy of Medicaid form, copy of medical assistance services card, Social services Notice of Action on benefits form
 - **Temporary Assistance for Needy Families:** Eligibility notification letter or Scholarship form signed by school employee, social worker, or case worker
- **Deadlines:**
 - a. Spring Season: Feb. 1
 - b. Fall Season: July 1

NNYSA

Youth Scholarship Application

Please Note: All information included on this application will be used solely and confidentially by NNYSAs.

You may use additional sheets as necessary in completing this application.

Should an award be made, you will be contacted directly via email.

First Name

Last Name

Child(ren) Name(s)

Division (IE U6)

Address, City, State, ZIP

Phone Number/Cell Phone

Email Address

Season Applying For:

Elko or Spring Creek:

Your Family Status: Single Married Divorced Widowed Number of family dependents on tax return _____

Please describe in detail why you are applying for a scholarship.

Are you willing to volunteer? If so in what capacity? IE setting up fields, working tournament tent etc.

Signature of Applicant

Date

NNYSA Notes:

Date