



Scholarship Application

Dear Scholarship Applicant,

It is the policy of Sandusky Bay Rowing Association to make our program available to all interested people, regardless of income. We provide scholarships to those who might not otherwise be able to participate. Full and partial scholarships will be awarded based individual circumstances.

To be eligible for a scholarship you must meet the family size/yearly income requirement set by our organization. Scholarships will be awarded on a first-come first-serve basis and a limited number of scholarships will be available. SBRA is a non-profit, largely volunteer run organization, therefore scholarship participants will be required to donate volunteer time equal to the amount of the scholarship. \$25 = 1 hour volunteer time.

Name _____ Date of Birth _____ Age _____

Address _____ City _____ Zip _____

Gender _____ Phone _____

Email Address _____

Number of people in our household _____

Yearly income (before taxes) _____

Is this the participant's first season with SBRA? YES NO

If No, how many seasons rowed with SBRA? _____

What amount of financial aid do you require? FULL Partial _____ % or \$ _____

Program Requesting Scholarship: REC TEAM MASTERS

When the application has been received to SBRA and reviewed by the board, you will be contacted to let you know if the scholarship was received. Please contact SBRA (rowsanduskybay@gmail.com) with any questions.

Office Use Only

Scholarship Amount _____ Period Covered _____

Date _____ Approved By _____

Please use the area below to write a brief statement outlining the reason you are requesting this scholarship. Please list any extenuating circumstances that should be considered when reviewing your application.

Please indicate your volunteer availability:

I certify that the above information is correct to the best of my knowledge and is provided to Sandusky Bay Rowing Association for the purpose of being considered for scholarship to enable the participant to row with SBRA. I understand that I am required to provide evidence to verify the above information and that all information will remain confidential.

Signature _____ Date _____

Print Name _____

Return this application along with copy of your most recent tax return (1040) to:

Sandusky Bay Rowing Association
2351 River Ave
Sandusky, OH 44870
rowsanduskybay@gmail.com