

## Youth Sports Scholarship Program

The Fairfax County Department of Community and Recreation Services (DCRS) provides scholarships for registration fees and vouchers for equipment to help eligible youth participate in sports programs. This program provides assistance to youth from low-income families who are not currently being served by existing scholarship or fee waiver programs.

**Eligibility:** To be eligible for a scholarship, a child must:

Qualify for assistance from one or more of the programs listed below:	<b>AND</b>	Meet each of the criteria listed below:
<ul style="list-style-type: none"> <li>• Free or Reduced School Lunch</li> <li>• Temporary Assistance for Needy Families (TANF)</li> <li>• General Relief</li> <li>• Food Stamps</li> <li>• Aid for Dependent Children</li> <li>• Foster Care</li> <li>• Medicaid</li> <li>• Social Security Income</li> </ul>		<ul style="list-style-type: none"> <li>• Be enrolled in school (kindergarten through 12<sup>th</sup> grade)</li> <li>• Commit to attend a minimum of 80% of scheduled practices and games</li> <li>• Not be currently served by an existing scholarship or fee waiver program</li> </ul>

Priority may be given to eligible youth recommended by a Department of Family Services' or Fairfax County Public Schools' social worker or a CRS program director. Priority may also be given to a youth involved with services provided under the Virginia Comprehensive Services Act (CSA) or a Human Service's "wrap-around" service initiative.

**Applications** may be submitted by individuals, families, schools or sports organizations. Parents, since many organizations prefer to submit the applications themselves, please check with your child's sports organization before submitting the application.

1. Complete the application on the other side of this page and sign it. If needed, make sure it is signed by the person verifying your child's eligibility. Official documents signifying the child is receiving aid may be used in lieu of signature.
2. Mail or fax the application to CRS by the following deadlines:
  - a. Spring Season by May 1
  - b. Summer/Fall Seasons by November 1
  - c. Winter Season by February 1
3. Eligible applicants will be confirmed and awarded scholarships one month after the application deadline. Registration waivers will be sent directly to the sports organizations; equipment vouchers will be sent directly to the participants.
4. If you have any questions, please contact CRS at 703-324-5649, TTY 703-222-9693 or [AthleticServices@fairfaxcounty.gov](mailto:AthleticServices@fairfaxcounty.gov).



Fairfax County is committed to a policy of nondiscrimination in all county programs, services and activities and will provide reasonable accommodations upon request. To request special accommodations call 703-324-4386, TTY 703-222-9693. Please allow ten working days in advance of the event in order to make the necessary arrangements.



A Fairfax County, Va., publication



www.fairfaxcounty.gov/rec  
May 2006

**YOUTH SPORTS SCHOLARSHIP PROGRAM APPLICATION**

**Complete and return the application form to CRS. Submit one application per child, per season.**

Child's Name	Parent/Guardian's Name
Age:	Address:
Gender:	
Date of Birth:	Daytime Phone:
School Attended:	Evening or Cell Phone:
Grade:	E-Mail Address:

**What sport is your child interested in playing? Please circle one choice per season.**

Soccer	Football	Lacrosse	Baseball	Cheerleading
Softball	Basketball	Volleyball	Track	Other

**Virginia Freedom of Information Act** I understand that my child's registration information is public record and, as such, may be released under the Virginia Freedom of Information Act unless I specifically request that this information not be released; therefore:

- I grant DCRS permission to release my child's registration information.
- I do not grant DCRS permission to release my child's registration information.

**CONSENT TO EXCHANGE INFORMATION** I understand that information may be needed to verify eligibility for this program and to coordinate services with other agencies; therefore, I agree that agencies may share my child's information. I certify that the information supplied is true and correct and that DCRS staff have my permission to verify the information on this application. I understand that my child's participation in this program requires a commitment to attend a minimum of 80% of the scheduled practices and games.

**REQUEST FOR FEE WAIVER or EQUIPMENT VOUCHER** My child is currently enrolled in a public assistance program such as Free or Reduced Lunch, General Relief, Food Stamps, ADC, Foster Care, Medicaid or SSI. I request a fee waiver for the Youth Sports Scholarship Program and give my permission for the Department of Family Services to release information verifying my eligibility. I understand that if I am receiving Medicaid or SSI, I must submit proof that I am receiving services.

***THIS SECTION MUST BE COMPLETED AND SIGNED IN ORDER TO PROCESS THE APPLICATION.***

Signature of Parent/Guardian _____	Date: _____	
Signature of caseworker verifying that applicant is receiving aid: _____		
Name: _____	Position: _____	Phone: _____
Services # _____ or Case # _____		
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With which organization/sports league/club does your child wish to play? _____		
Season: _____ You must contact the organization to register your child.		
Which type of assistance are you requesting? <u>Registration Fee Waiver</u> OR <u>Equipment Voucher</u>		