

# Mustangs Youth Athletic Scholarship Program Application

Offered through: Gwinnett Parks & Recreation and

## Gwinnett Parks Foundation



### Mustangs 2019 Registration Deadlines

Spring Basketball/Cheer	January 31, 2019
Winter Basketball/Cheer	September 30, 2019

**Gwinnett Parks Foundation Scholarship Information:** All scholarships are awarded based on demonstrated need, available funding, and meeting deadline requirements for Gwinnett County Residents only. Mustangs Youth Athletic Scholarships are limited to two awards for Gwinnett County Parks and Recreation (GCPR) administered Mustang programs per Family/Members of the same address per year. Misleading information or expulsion from a program will result in scholarship probation for a period of one year from date of application. Priority will be given to first time applicants. Participation in programs may include being photographed for publicity purposes.

**Participant Scholarship Criteria:** Demonstrated need for financial assistance as outlined in document section below; age 17 and under; Gwinnett County Resident; application with required documentation completed and submitted by registration deadline; all other GCPR eligibility, guidelines and sport requirements met; has not been placed on scholarship probation.

**Application Instructions (complete one application per participant):** Parent/legal guardian complete the information below → **Include all required supplemental paperwork as required. \*\*No tax return information or pay stubs should be forwarded as documentation\*\*** → Sign and date the application → Forward the application and related documentation by the registration deadline date: **EMAIL TO: gcprscholarships@gwinnettcountry.com; FAX TO: 770.822.8835; OR MAIL TO: GCPR Scholarships, 75 Langley Dr., Lawrenceville, GA 30046.** Applications will only be accepted via email, fax or mail. **INCOMPLETE APPLICATIONS AND THOSE NOT MEETING THE CRITERIA ABOVE WILL NOT BE CONSIDERED.**

**Scholarship Award Notification:** Recipients will be notified by email no later than five business days after the registration deadline for which they are applying. **If approved, recipients will be sent a confirmation email to use when proceeding with walk-in or online registration.** This scholarship program is separate from the registration process; and application or receipt of a scholarship does not guarantee space on a team or league. Any additional fees must be paid at the time of registration by the participant.

Participant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Sport Requested: \_\_\_\_\_ Season: \_\_\_\_\_

Shirt Size: \_\_\_\_\_ Cost: \_\_\_\_\_

Athletic Association/Park: \_\_\_\_\_ Mustangs Youth Athletic Program at Lucky Shoals Park

Parent/Legal Guardian: \_\_\_\_\_ Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email (PRINT): \_\_\_\_\_

Is anyone else at this address applying? :  No  Yes If yes, who? \_\_\_\_\_

Has the participant received a GCPR Scholarship before?  No  Yes If yes, when? \_\_\_\_\_

I request a scholarship in the amount of: \$ \_\_\_\_\_ School Attending: \_\_\_\_\_

**Check all that apply and attach documents to support financial need. Documents must be included to be considered for assistance. No tax returns.**

<input type="checkbox"/> Federal Welfare (TANF) Recipient	<input type="checkbox"/> Unemployment
<input type="checkbox"/> Social Security Benefits	<input type="checkbox"/> Peach Care
<input type="checkbox"/> Other (identify): _____	

I \_\_\_\_\_ certify that I/my family is receiving the assistance as stated above.

**Parent/ Legal Guardian Signature**

In your own words, briefly explain why this applicant should be considered for scholarship assistance: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I, \_\_\_\_\_, have completed this application on behalf of \_\_\_\_\_. I understand that this application form does not guarantee an opening or acceptance into the sport requested or a scholarship award. I also attest, to the best of my knowledge, that the information contained herein is accurate and truthful.

\_\_\_\_\_  
**Parent/Legal Guardian Signature**

\_\_\_\_\_  
**Date**