



City of Eau Claire Parks and Recreation Scholarship Application

Scholarship applications **MUST** be submitted in person at 915 Menomonie Street

PRIMARY APPLICANT INFORMATION				
First Name:		Last Name:		
Address:				
City: Eau Claire		State: WI Zip Code:		
Home Phone:		Work Phone:		
Cell Phone:		Total Family Members Applying:		
Email Address:				
LIST ALL MEMBERS APPLYING FOR SCHOLARSHIP ASSISTANCE (including primary applicant)				
NAME (first and last, if different than above)	GENDER	BIRTHDATE	AGE	GRADE

NOTE: This is not a registration form. Once you have received approval for the scholarship program, you will be able to register for programs and pay only 25% of the program fee. The scholarship does not apply to School District discounted fees. Registration is what ensures participation in the program. ***Families will be asked to confirm their eligibility status once each calendar year.***

***I have read the Scholarship Program Guidelines and understand the policies and criteria for eligibility.**

Signature of Applicant (Adult)

Date

CURRENT SCHOLARSHIP AUTHORIZATION (For Office Use Only):

Proof of Food Share Quest Letter **OR** Proof of ECASD Free Lunch Program

OR Other _____

Proof of Identification Proof of City Address

Approval Date: _____ Approved By: _____