

### Scholarship Guidelines/Eligibility

The scholarship program is available to Pasco County Residents ages 5 to 13 years of age currently for the following locations. Veterans Memorial Park, J Ben Harrill Complex and Centennial Middle School. The Florida Income Eligibility Guidelines for Free Meals from the Pasco County School Board are the guidelines utilized by the Parks, Recreation & Natural Resources Department for awarding scholarships.

**To be considered for scholarship assistance, applicants must meet the following requirements:**

- Parent, legal guardian, or custodian must provide two proofs of identification that verify they reside in Pasco County.
- Letter from school confirming current eligibility in the Florida free meal program.
- Complete the Resident Scholarship Application form in its entirety and deliver in person or mail to the address listed below:

Pasco County Parks, Recreation & Natural Resources Department Scholarship Program  
4111 Land O' Lakes Blvd., Suite 202  
Land O' Lakes, FL 34639-4402

### Additional Information

- All supporting documents must accompany the application for the request to be considered. Incomplete applications, will be denied.
- Requests are handled on a first-come, first-serve basis.
- **Scholarship approval does not guarantee enrollment** into the Summer Day Camp program — applicant must follow the registration procedure for the program.
- Applications will be accepted beginning May

17th through June 15th, or while funds last. Applications post marked after June 15th will not be accepted. Scholarship recipients must register at their site of approval while space is available. An approved scholarship does not hold a spot in camp.

- Applicants that qualify for **free** lunch will receive **50%** off the price of their requested camp(s).
- Limit 1 camp program per child per calendar year. Limit 2 children per family per calendar year. Family benefit limit may not exceed \$100 in a calendar year.
- Eligible programs are the Pasco County Parks & Recreation Department's Summer Day Camp program.
- Scholarships granted only if funds are available.
- Applicant receiving scholarship funds from another agency will not be eligible for a scholarship.
- All other possible scholarship opportunities may be relinquished if a scholarship recipient does not show up for a program with out notice.
- **We thank the scholarship recipients and their parent/guardians for abiding by all rules and regulations and for always displaying appropriate behavior, acting in a courteous respectable manner while participating in County-sponsored activities.**

Pasco County

Parks, Recreation & Natural Resources Department  
4111 Land O' Lakes Blvd., Suite 202  
Land O' Lakes, FL 34639-4402  
Phone (813) 929-2760



# *Pasco County Parks, Recreation & Natural Resources Department Resident Youth Scholarship Application*

IT STARTS IN  
**PARKS**  
Coaching. Connecting. Community.

# Pasco County Parks, Recreation & Natural Resources Department

## Resident Scholarship Application (VMP / JBH)



Applicant's (Parent/guardian's) Name(s): \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

\_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

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

Please list child twice if applying for two programs.

\*Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B.: \_\_\_/\_\_\_/20\_\_\_ Program Site Applied For: \_\_\_\_\_ Cost Per Week: \$ \_\_\_\_\_

Number of Weeks Attending: \_\_\_\_\_ Total Cost of Camp Before Scholarship: \$ \_\_\_\_\_ Program Dates: \_\_\_\_\_ to \_\_\_\_\_

\*Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ D.O.B.: \_\_\_/\_\_\_/20\_\_\_ Program Site Applied For: \_\_\_\_\_ Cost Per Week: \$ \_\_\_\_\_

Number of Weeks Attending: \_\_\_\_\_ Total Cost of Camp Before Scholarship: \$ \_\_\_\_\_ Program Dates: \_\_\_\_\_ to \_\_\_\_\_

Number of Persons in Household: .....

Household Gross Income before taxes and other deductions: \$ \_\_\_\_\_

*Checklist of requirements (below)*

1.  I have supplied paperwork confirming I qualify for *free* lunch through Pasco County Schools
2. \_\_\_\_\_ and \_\_\_\_\_ are my two forms of identification verifying Pasco County residency.
3. My one page letter expressing why this program is important to the participant is included.

**\$100 limit per family—**

### **Office use only**

\*\*\*Date Received: \_\_\_/\_\_\_/2018

\*(Child 1) Site/Cost: \_\_\_\_\_/\_\_\_\_\_ 50% reduction of Cost = \$ \_\_\_\_\_. Scholarship amount is: \_\_\_\_\_ OR \$100.00 Applicant owes \$ \_\_\_\_\_

\*(Child 2) Site/Cost: \_\_\_\_\_/\_\_\_\_\_ 50% reduction of Cost = \$ \_\_\_\_\_. Scholarship amount is: \_\_\_\_\_ Applicant owes \$ \_\_\_\_\_

**Scholarship Grand Total:** \_\_\_\_\_ **Applicant Grand Total:** \$ \_\_\_\_\_

Authorized Staff Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_