



GENERAL SCHOLARSHIP REQUEST

The City Department of Parks, Recreation & Golf (PRG) provides a scholarship program for Commerce City residents in need. The scholarship provides up to a 50% discount on programs offered throughout PRG. Scholarships are only awarded for program fees \$21 and above, per participant, per activity. Scholarship requests must be submitted each session for each participant. If you wish to register immediately to guarantee a spot, you will forfeit your scholarship application, and be ineligible to receive a scholarship. We will not apply a scholarship after the fact and process a refund.

Requests for scholarships on annual facility passes are not approved unless a severe hardship case is demonstrated and authorized by the department management. In which case, no more than 25% discount may be awarded. Scholarship eligibility requires the applicant:

- be in good standing with PRG,
- be a current resident of the City of Commerce City, Colorado,
- is currently enrolled in one of the government assistance programs listed below,

Proof of residency must be in the form of a:

- valid driver's license,
- current car registration, or
- recent utility bill
- a student can be proven with a current school ID.

Proof of enlistment in the assistance program must be presented at time of application. A printed copy from the Colorado PEAK website is preferred, if available. If you do not qualify through the assistance programs or the income table, please provide written information indicating reason for making request. (Requests will be reviewed by the PRG Division Manager on a case by case basis.) You may be asked to provide additional paperwork prior to receiving a decision regarding your scholarship request.

Up to 50% Discount

- SNAP – Food Stamps
- WIC – Women, Infants and Children Supplemental Food Program
- TANF – Temporary Assistance for Needy Families
- Medicaid
- LEAP – Low Income Energy Assistance Program
- Child/Parent of Foster Care
 - *SNAP, TANF, and Medicaid recipients must show a recent print off from the Colorado PEAK website showing **current coverage** of the program for the individual seeking a scholarship
 - *LEAP recipients must show a current letter from LEAP or Xcel Energy stating current LEAP assistance

Up to 25% Discount

- CHP+ – Child Health Plan Plus
- SSI – Social Security Supplemental Income
- SSDI – Social Security Disability Income
- HCP – Health Care program for Children with Special Needs
- HUD – City's Minor Home Repair Program
- CICP – Colorado Indigent Care Program

Federal Income Guideline Table

Please circle your annual household's income range, before taxes, based on your household size.

Find the number in your household – then circle your income range **on the same row.**

Based on 2018 Denver Area Median Income				
# in Your Household	Income Range \$	Income Range \$	Income Range \$	Income Range \$
1	0 – 18,900	18,901 – 31,500	31,501 – 50,350	50,351+
2	0 – 21,600	21,601 – 36,000	36,001 – 57,550	57,551+
3	0 – 24,300	24,301 – 40,500	40,501 – 64,750	64,751 +
4	0 – 26,950	26,951 – 44,950	44,951 – 71,900	71,901 +
5	0 – 29,150	29,151 – 48,550	48,551 – 77,700	77,701 +
6	0 – 31,300	31,301 – 52,150	52,151 – 83,450	83,451 +
7	0 – 33,450	33,451 – 55,750	55,751 – 89,200	89,201 +
8	0 – 35,600	35,601 – 59,350	59,351 – 94,950	94,950 +

Please check your responses to the questions below:

Are you a female head of household?	Yes	No
Are you or anyone in your household disabled?	Yes	No
Are you or anyone in your household 62 or older?	Yes	No

Please check your ethnic background:

- Hispanic or Latino
- Not Hispanic or Latin

Please check your race:

- | | |
|---|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> Asian & White <input type="checkbox"/> Black/African American & White <input type="checkbox"/> American Indian/Alaskan Native | <ul style="list-style-type: none"> <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> American Indian/Alaskan Native & White <input type="checkbox"/> American Indian/Alaskan Native & Black/African American <input type="checkbox"/> Other Multi-racial _____ |
|---|---|

Registration Information

Parent Name (if applicable): _____

Address: _____ Zip Code: _____

Phone: _____ Email: _____

Name of Participant: _____ Date of Birth: _____

Activity Title: _____ Gender: _____

Fee for Activity: _____ Activity Dates: _____

Name of Participant: _____ Date of Birth: _____

Activity Title: _____ Gender: _____

Fee for Activity: _____ Activity Dates: _____

Name of Participant: _____ Date of Birth: _____

Activity Title: _____ Gender: _____

Fee for Activity: _____ Activity Dates: _____

Name of Participant: _____ Date of Birth: _____

Activity Title: _____ Gender: _____

Fee for Activity: _____ Activity Dates: _____

I hereby certify the information on this form is accurate and complete. I understand this application may be subject to further verification by PRG, the City of Commerce City, or the U.S. Department of Housing and Urban Development.

I, therefore, verify the information provided and, if necessary, will provide supporting documents. If the scholarship is approved, I agree to pay any remaining portion of the program fees. Without full payment of the fees, the applicant cannot register for the program(s).

Applicant's Signature: _____ Date: _____

Applicant's Name: _____
(Please Print)

All scholarships must be approved prior to registration.

The City's Community Development Block Grant funds are being utilized in the PRG Scholarship Program.

ADMINISTRATIVE USE ONLY

Date Received: _____ Date Processed: _____

Documentation Attached: Colorado Peak Copy of Proof of Residency

Special Circumstances: _____ % of Disc _____

Total Amount Paid by Applicant: \$_____ Approved/Disapproved by: _____

REGISTRATION USE ONLY

Date contacted: _____ Reg. Staff Initials: _____

Result: _____ Date Used/Trans #: _____
