



### Application for Financial Need Scholarship

Child's Name	Address
Father / Guardian's Name	Father / Guardian's Employer(s):
Mother / Guardian's Name	Mother / Guardian's Employer(s)
Mother / Guardian's Phone	Father / Guardian's Phone
Number of children living in household	Number of children playing for FSCI

Please submit the following items from BOTH parents along with this application:

- Written explanation on why you need financial assistance
- Signed and completed tax returns for the previous 2 years
- Complete Bank statements for the previous 3 months (no missing pages)
- Paystubs for the last 3 months of employment or proof of unemployment
- Contact info to verify employment

Please submit at least 1 of the following items to supplement the items above

- Proof of enrollment in the Supplemental Nutrition Assistance Program (SNAP)
- Proof of enrollment in the National School Lunch Program
- Proof of enrollment in public assistance programs such as ADC, Medicaid, etc.
- Any other documentation to justify financial assistance including bills, proof of disability, etc.

I hereby state that all supplied information is true and accurate. I understand that any discrepancies found may result in termination of any financial assistance. I also understand that FSCI may request additional information and I must be prepared to provide such information. I also understand that all documentation provided must be complete and in an unaltered state. This application does not guarantee financial assistance will be awarded.

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Parent Name

Parent Signature

Date