**Scholarship Policy Statement**

*PLEASE READ CAREFULLY!*

**It is the policy of Girls on the Run of Kaufman to offer our program to all girls who desire to participate in the program, regardless of their family’s financial status. Families who are unable to pay the program registration fee may be awarded financial assistance based on their income. Scholarships are granted on a first come, first served basis, and may be limited by the resources available at the time of application.**

**Kaufman**



**APPLICATION PROCESS**

1. Fill out a Girls on the Run Registration Form**.**
2. Complete this Scholarship Application.
3. Return the Registration Form, Scholarship Form **AND** **minimum fee** to **Girls on the Run of Kaufman, Attn: Rhonda Carter, 905 S. Madison Street, Kaufman, TX 75142.**
4. Your application will be processed within 10 working days. At that time, you will receive notification regarding your scholarship status.

**GENERAL INFORMATION:**

Daughter’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other activities your daughter is involved in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever received financial assistance from Girls on the Run?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: ­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marital Status: \_\_\_\_\_Single \_\_\_\_\_\_Married \_\_\_\_\_\_Separated/Divorced \_\_\_\_\_Widowed

Spouse’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse’s Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Income Information:**

Please list your total monthly income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Please list your total monthly Expenses: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many people live at the address above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you qualify for free or reduced lunch at your school? € YES, please indicate which one: € Reduced € Free

 € NO

**SPECIAL CIRCUMSTANCES**

**List AND document** any special circumstances that contribute to your request for financial assistance. Please use the back of this sheet if necessary. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SCHOLARSHIP GUIDELINES**

1. Girls on the Run of Kaufman believes a strong sense of pride and ownership is developed if the financial assistance recipient has contributed to the cost of their involvement. Therefore, applicants will be asked to pay a portion of the program fees. All program fees are kept confidential, as they are specific to individual and family circumstances, and are reviewed each session of Girls on the Run. What is the amount you are able and/or willing to pay for the program (*minimum* $25)? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (can make payments throughout season)**
2. Girls on the Run of Kaufman is fortunate to have donors who support our scholarship fund. Therefore, we feel it is important for you to understand the significance of being awarded a scholarship and that you respect this honor. Failure to do so will result in elimination from future GOTR programs.

**Please read the following and sign:**

If my daughter is awarded the scholarship, she agrees to fully participate in all 12 weeks of the scheduled GOTR activities, including the end of the season 5K, and will abide by the above scholarship guidelines. We also agree to pay the minimum fee required for scholarship eligibility by the end of the 4th week of the season.

**Parent/Guardian:** By signing this document, I certify that the information contained in this application is accurate and truthful:

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Return Completed Form to:**

Girls on the Run of Kaufman

Attn: Rhonda Carter

905 S. Madison Street

Kaufman, TX 75142

**FOR OFFICE USE ONLY: DATE RECEIVED: \_\_\_\_\_\_\_\_\_\_ AMOUNT PAID: \_\_\_\_\_\_\_\_\_**

**DATE CONTACTED: \_\_\_\_\_\_\_\_\_\_\_ BY: \_\_\_\_\_\_\_\_\_ MAIL: \_\_\_\_\_\_ E-MAIL: \_\_­­\_\_\_\_ PHONE: \_\_\_\_\_\_**