



City of Whitefish Parks & Recreation Program Scholarship Application

Parent / Guardian _____ Participant _____

Physical Address _____ City & State _____ Zip _____

Primary Phone _____ Secondary Phone _____

E-mail Address _____

Does the participant attend Whitefish School District? Yes No

Program scholarship request is for:

Number of days scholarship is requested for:

Please complete the information below to determine eligibility for scholarship funding.

Family Size & Income

1. How many people live in your home?
 2. Of those people, how many are dependents?
 3. Of those people, how many do you hope to enroll in this Parks & Recreation program?*
- *a separate scholarship application must be submitted for each participant
4. Your gross wages before deductions per month:
 5. Your total gross other income per month, to include child support, alimony, disability:
 6. Total income of other adults living in your home per month, gross wages & other:

Total household monthly income:

7. Proof of income is required. When submitting this application, scan and attach proof of income via email or submit hard copies.

Current Assistance Programs

Check all that apply for current assistance you receive:

_____ Supplemental Nutrition Assistance Program (SNAP)

_____ Temporary Assistance for Needy Families (TANF)

_____ Child in Transition (CIT)

_____ Other:

Signature of Applicant:

Date: