

Youth/Senior Activity – Recreation Scholarship Application

Offered through: Gwinnett Parks & Recreation and

Gwinnett Parks Foundation



Applications are accepted at any time and processed provided there are funds available when application is received.

Gwinnett Parks Foundation Scholarship Information: All scholarships are for Gwinnett County residents only and are awarded based on demonstrated need, available funding, and meeting deadline requirements. **Youth/senior activity recreation scholarships are limited to two awards for Gwinnett Parks and Recreation (GPR) administered classes/programs per family/members of the same address per year.** Scholarships are awarded to applicants with a health/wellness need and may require proof of need. Misleading information or expulsion from a program will result in scholarship probation for a period of one year from date of application. Priority will be given to first time applicants. Participation in programs may include being photographed for publicity purposes.

Participant Scholarship Criteria: Demonstrated need for financial assistance as outlined in document section below; Gwinnett County resident; youth scholarships awarded to those age 17 and under; senior scholarships awarded to those age 50 and up; application with required documentation completed and submitted on a timely basis; all other GPR eligibility, guidelines and requirements met; has not been placed on scholarship probation.

Application Instructions (*complete one application per participant*): Parent/legal guardian complete the information below
➔ Include all required supplemental paperwork as required (No tax return information or pay stubs should be forwarded as documentation)
➔ Sign and date the application
➔ Forward the application and related documentation by the registration deadline via **email GCPRscholarships@GwinnettCounty.com; or fax: 770.822.8835; or mail: GCPR Scholarships, 75 Langley Dr., Lawrenceville, GA 30046.** Applications will only be accepted via email, fax or mail. Incomplete applications and those not meeting the criteria above will not be considered.

Scholarship Award Notification: Recipients will be notified by email no later than five business days after the submission of their application. **If approved, a confirmation email will be sent to use when proceeding with walk-in or online registration.** The scholarship program is separate from the registration process; and application or receipt of a scholarship does not guarantee space in a class or program. Any additional fees must be paid at the time of registration by the participant.

Participant's Name: _____ Date of Birth: _____ Location/Park: _____
Class/Program Desired: _____ Season/Session Dates: _____ Cost: \$ _____

Parent/Legal Guardian: _____ Home Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Email (PRINT): _____

Is anyone else at this address applying? : No Yes If yes, who? _____

Has the participant received a GCPR Scholarship before? No Yes If yes, when? _____

I request a scholarship in the amount of: \$ _____ School Attending: _____

Check all that apply and attach documents to support financial need. Documents must be included to be considered for assistance. No tax returns.	<input type="checkbox"/> Federal Welfare (TANF) Recipient	<input type="checkbox"/> Unemployment
	<input type="checkbox"/> Social Security Benefits	<input type="checkbox"/> Peach Care
	<input type="checkbox"/> Other (identify): _____ <small>tax returns or pay stubs should not be sent</small>	

I _____ certify that I/my family is receiving the assistance as stated above.
Applicant Signature or Parent/Legal Guardian (of minor)

In your own words, briefly explain why this applicant/I should be considered for scholarship assistance based on the health/wellness need described here:

I, _____, have completed this application on behalf of _____.
I understand that this application form does not guarantee an opening or acceptance into the class/program requested or a scholarship award. I also attest, to the best of my knowledge, that the information contained herein is accurate and truthful.

Applicant Signature or Parent/Legal Guardian (of minor)

Date

These scholarships apply only to Gwinnett Parks and Recreation activities; does include activities/programs held at Health & Human Services locations.