



Recreation Scholarship Application

ADULT/PRIMARY GUARDIAN:

First Name _____ Last Name _____ DOB _____

Phone Home _____ Cell _____ Email _____

Address _____ City _____ Zip _____

Employed by _____

Gross Monthly Income \$ _____ Other Income \$ _____

ADULT/SECONDARY GUARDIAN (if applicable):

First Name _____ Last Name _____ DOB _____

Employed by _____

Gross Monthly Income \$ _____ Other Income \$ _____

HOUSEHOLD ASSISTANCE RECEIVED (check all that apply)

Documentation must be in the name of, or applicable to, an adult in the household.

___ SNAP ___ TANF ___ Oregon Health Plan ___ SSA/SSI Benefits

PLEASE LIST ALL DEPENDENT CHILDREN AGE 18 AND UNDER

First Name	Last Name	Date of Birth	M/F

I certify that the above information is true and correct and that all household income is reported. I will notify Bend Park and Recreation District of any changes in income or family size. I represent that I am a resident of the City of Bend or the surrounding area. I understand that providing false or incomplete information to the District will immediately lose their financial assistance.

Signature

Date

Authorizing Signature _____	Date _____
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For office use only Date Received _____ by _____



Recreation Scholarship Application Instructions

Bend Park and Recreation District (BPRD) believes that everyone should have the opportunity to benefit from recreation activities. BPRD provides financial assistance to qualifying individuals and households for many recreation programs and activities. Please follow the instructions below so we can determine your eligibility. If you have any questions, contact our Scholarship Team at 541-706-6238 or scholarships@bendparksandrec.org.

1. **Complete the application.** You can submit an application at any time; however, allow at least one week for processing prior to registering for an activity.
2. **Make a copy of eligibility documentation.** You must provide documentation in order to determine eligibility. Documentation must be in the name of, or applicable to, an adult in the household. You may do this by submitting **one** of the following:
 - Current eligibility/award letter for SNAP, TANF or Oregon Health Plan (an adult must be listed to be eligible), **OR**
 - Copy of most recent Federal 1040 income tax returns, **OR**
 - If you are unable to provide either of these, you may submit other documentation of income (SSA/SSI Benefit Statements, or last 3 months of paycheck stubs, etc.).
3. **Submit application and documentation.** Completed applications along with income documentation can be submitted in any of the following ways:
 - [Complete the confidential online application](#)
 - Mail to Juniper Swim & Fitness Center c/o Scholarships, 800 NE 6th St, Bend, OR 97701
 - Drop off in a sealed envelope marked "Scholarship Application" at any District business location including: Juniper Swim & Fitness Center (800 NE 6th St), Larkspur Community Center – Home of the Bend Senior Center (1600 SE Reed Market Road), The Pavilion (1001 SW Bradbury Way) and the District Office (799 SW Columbia St).
4. **Notification of award.** You will be notified of the status of your scholarship application within 5 business days of submitting the completed application and documentation. If approved, you will be eligible for a 12-month period. You will need to apply before the end of the 12-month period to be considered for renewal.
5. **Confidentiality:** The District will keep all application materials confidential and will not share the application materials with other individuals, organizations or agencies without your express approval. Only District staff who review and approve scholarship applications will have access to the submitted materials.