



SCHOLARSHIP APPLICATION

2017/2018

“Steamboat Adaptive Recreational Sports ‘STARS’ provides recreational opportunities for people with disabilities, resulting in empowering and enriching the quality of life for its participants.”

Winter 2017 Applications Due by December 1st, 2017

Summer 2018 Applications Due by June 1, 2018

STARS awards scholarships based on need and available funds.

ALL INFORMATION WILL REMAIN CONFIDENTIAL

Client Name _____ DOB ____/____/____

Client Disability _____

Client Phone _____ Other Phone _____

Primary Mailing Address _____

City _____ State _____ Zip _____

Cell Phone _____ Other Phone _____

Email Address _____

If participant is a minor:

Parent / Guardian Names _____

Mother Phone _____ Email _____

Father Phone _____ Email _____

Guardian Phone _____ Email _____

APPLICANT INFORMATION

Applicant, Parent or Guardian must complete and submit this application, please attach a copy of your most recent year Tax Return. Any costs not covered by the scholarship must be paid in full prior to participating.

Client

Employer / Occupation _____ How Long _____

Monthly Gross Income \$ _____

Mother

Employer / Occupation _____ How Long _____

Monthly Gross Income \$ _____

Father

Employer / Occupation _____ How Long _____

Monthly Gross Income \$ _____

Number of people living in household: _____

Below are income guidelines for eligibility. If your gross household income (before taxes) is less than the amounts shown below, you might be eligible for a partial or full scholarship. Scholarships will be awarded based on need and available funds. *Guidelines include Child Support and Unearned Income.*

| Family Size | Monthly GROSS Income | Annual GROSS Income |
|-------------|----------------------|---------------------|
| 2 | \$2625 | \$31,500 |
| 3 | \$3300 | \$39,600 |
| 4 | \$3975 | \$47,700 |
| 5 | \$4650 | \$55,800 |
| 6+ | \$5325 | \$63,900 |

Is the participant currently receiving assistance from one or more of the following programs?

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Free or Reduced School Lunch Program | <input type="checkbox"/> Food Stamps |
| <input type="checkbox"/> Medicaid | <input type="checkbox"/> Unemployment |
| <input type="checkbox"/> Medicare | |

Please describe any specific impacts to your current financial situation that you would like considered as we review your application. _____

Have you participated in STARS programs in the past? Yes / No

If yes, which programs and what dates? _____

Which of our STARS programs are you interested in participating during the 2017 / 2018 Season? _____

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED
(Please indicate N/A if not applicable)

I hereby certify that all the above information is true, correct and complete. I acknowledge that failure to complete this entire application and/or submitting false information may disqualify me or my child from financial assistance.

Printed Name _____

Signature _____ Date ____/____/____

Please upload this document and a copy of your most recent year Tax Return to your online account. You can do this by logging into your account and using the drop-down menu item called "Upload your Scholarship Documents"

Mail: STARS, PO Box 770208, Steamboat Springs, Colorado 80477

FAX: 970-870-1970

For more information contact STARS Executive Offices at 970-870-1950





SCHOLARSHIP PROGRAM REQUEST FORM

Please indicate below what programs/lessons you are specifically requesting for your scholarship.

We will notify you if we can accommodate the lessons/programs.

For specifics on dates/times of programs, please visit our website at steamboatstars.com.

| | | | | | |
|---|--|--|---------------------------------------|------------------------------------|-----------------------------------|
| ACTIVITY | <input type="checkbox"/> Alpine | <input type="checkbox"/> Nordic | <input type="checkbox"/> Snowshoe | <input type="checkbox"/> Snowboard | <input type="checkbox"/> Snowbike |
| LEVEL | <input type="checkbox"/> Never-ever | <input type="checkbox"/> Beginner | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Advanced | |
| <u>PRIVATE LESSONS and or GUIDE/BUDDY PROGRAM</u> | | | | | |
| <input type="checkbox"/> Full day | Dates requested: _____ | | | | |
| <input type="checkbox"/> Half day | Dates requested: _____ | | | | |
| <u>PROGRAMS</u> | | | | | |
| All Access | <input type="checkbox"/> 9:00 - 2:00 (Ages 5 - 12) Saturdays | <input type="checkbox"/> 10:00 - 3:00 (Ages 13 - 18) Saturdays | | | |
| Mountain Access | <input type="checkbox"/> 9:00 - 2:00 Sundays | <input type="checkbox"/> 10:00 - 3:00 Sundays | | | |
| <input type="checkbox"/> Special Olympics | | | | | |
| <u>CAMPS</u> | | | | | |
| <input type="checkbox"/> All Mountain Ski and Ride (Jan 7-12) | | | | | |
| <input type="checkbox"/> Stars of Tomorrows Kids Camp (Mar 23 - Mar 26) | | | | | |