

## **Scholarship Application for Recreation Classes**

Kirkland Parks and Community Services strives to offer recreation programs that are welcoming and inclusive for all. Scholarships are available to Kirkland residents who meet income eligibility requirements. Residents may apply for scholarships for themselves or any member(s) of their household.

## **Details and Eligibility**

- 50%, 75% and 95% scholarships are available to residents of the City of Kirkland who meet household size / total household income requirements. *Household Size* is defined as those on the IRS Income Tax Return and/or all individuals living in your home that you care for. *Total Household Income* is defined as the total income before taxes of all adult household members for the year.
- Applicants can be awarded up to \$450 per household member, per calendar year as long as funds are available. Funds are valid for activity fees only. *Funds cannot be applied to adult sports leagues, rentals, extra supply and materials fees and late fees for Day Camp Programs.* All unused funds expire on December 31<sup>st</sup> in the year in which the funds were awarded.
- Scholarship Applications are accepted year-round. Submission of this Scholarship Application does not reserve a space or register the participant into a program automatically. Staff will contact you within two business days after receipt of all information to notify you of your application status.
- Once a Scholarship Application is approved and the recipient notified, scholarship recipients may
  register for recreation programs online at <u>www.kirklandparks.net</u> or can call 425-587-3336 to register
  for programs by phone. The balance of the program fee will be due at the time of registration.

## **How to Apply**

- 1. Complete and sign this Scholarship Application for Recreation Classes Form. An online version is available at <u>http://www.kirklandwa.gov/RecreationScholarships</u>
- 2. Provide Proof of Income and Proof of Residency.

**Acceptable Proof of Income:** your most current tax return (ex: IRS Form 1040), and SSA-1099 if receiving Social Security or a Free/Reduced Lunch Determination Letter. Please black out any sensitive information like social security numbers, bank account, etc.

*Acceptable Proof of Kirkland residency:* Water/Sewer/Garbage bills, PSE gas/electric bill, lease agreement or mortgage paperwork.

Send only copies of your documents. They will not be returned. *Anyone unable to provide these documents should contact Department Staff at 425-587-3330.* 

3. Submit your completed application and supporting materials.

Return via email to <u>eParks@kirklandwa.gov</u> or mail to: Attn: Parks Recreation Division Kirkland City Hall 123 5<sup>th</sup> Ave Kirkland, WA 98033

Household / Income Eligibility Chart									
If Your Household Size is (number of persons)		1	2	3	4	5	6	7	8+
You are eligible for a 50% scholarship	If your Total Annual Income is	\$77,700 or less	\$88,800 or less	\$99,900 or less	\$110,950 or less	\$119,850 or less	\$128,750 or less	\$137,600 or less	\$146,500 or less
You are eligible for a 75% scholarship	If your Total Annual Income is	\$52,700 or less	\$60,250 or less	\$67,800 or less	\$75,350 or less	\$81,400 or less	\$87,450 or less	\$93,400 or less	\$99,450 or less
You are eligible for a 95% scholarship	If your Total Annual Income is	\$31,650 or less	\$36,200 or less	\$40,700 or less	\$45,200 or less	\$48,850 or less	\$52,450 or less	\$56,050 or less	\$59,700 or less

Scholarship eligibility levels are determined by 2024 Seattle-Bellevue, WA HUD Metro FMR Area Income Limit Summary

LIST OF HOUSEHOLD MEMBERS						
Applicant's First Name	Applicant's Last Name	Date of Birth	Gender			
Household Member's First Name	Household Member's Last Name	Date of Birth	Gender			
	PPLICANT INFORMATION					
Home Address						
Primary Phone	Email Address					
Household Size	Total Annual Income Before Taxes					

If your income exceeds these guidelines and you have personal circumstances pertinent to this application, please describe them on an additional sheet of paper and attach it to your application.

I certify and declare, under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Applicant's Signature\_\_\_\_\_ Date\_\_\_\_

For Department Use Only (Updated 12/30/2024)									
Date received	Verified by		Approved	□ Not Approved	□ Exception				
Residency Document			Income Document						
Participant notified on	//	_ by	Notes						