BAY UNITED SOCCER CLUB

Scholarship Application for Spring

Bay United Soccer Club is a non-profit organization that seeks to promote youth soccer in Northwest Florida. BUSC understands the financial commitment that is required to participate in select soccer. In order to assist players who need assistance with finances, a scholarship fund has been created. A limited number of scholarships are available and are awarded based on a scoring guide that assesses the players' financial need. Scholarships applicants must have been offered a player spot on a competitive BUSC team to be eligible.

Please complete the following application and submit it along with all requested data to the Scholarship Review Committee on or before January 15. Applicants will receive a response before February 1 with the status of their scholarship application. All requested data should be submitted with this form or your application could be rejected for lack of information. Forms can be submitted to any BUSC Executive Board Member. All scholarship applications and data are kept confidential.

	Tax return from previous year,
	Pay stub from all guardians/adults who provide for applicant
Sul	bmit any proof of financial need (Possible Exam <mark>pl</mark> es listed below)
	Low incoming housing residency
	Florida Kid Care insurance
	Free or Reduced School Lunch
	Disability or Unemployment eligibility
	Other equivalent proof will be accepted
	If not eligible for any of these or other programs, decisions will be based on proof of income

This statement should be a maximum of 1 page detailing why you need the scholarship (example—unemployed, disabled, full-time student, etc.)

You may include any information that you would like for the committee to know about the player or family who is applying for the scholarship.

A limited number of scholarships are available and will be awarded based on a scoring system derived from the data listed above. Applicants must reapply for scholarships each season as needed. The parents or guardians of scholarship recipients will be required to volunteer at all local BUSC events as needed--including but not limited to Endless Summer Soccer Tournament, Halloween Kick-or-Treat, Cinco de Mayo, and Fun Day--for the season during which the scholarship is awarded. Please plan to be available during the entire activity.

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Scholarship Application

(Submit by January 15 to a BUSC Executive Board Member)

Player's Name:	Date of Birth:
Parent's Name(s):	
Address:	
Phone Number(s):	<u> </u>
Email Address:	171
BUSC Team:	- 1/2/
1. How much can you afford to pay monthly?	LADAS
2. What is your monthly household income?	Uallilall
Have you previously received a BUSC scholarship? Please circle answe	r: Yes No
If so, how many times have you received this scholarship in the past?	
STERM 19	91
I verify that the information that I have submitted with this application Committee is accurate.	n to the BUSC Scholarship
I understand that a limited number of scholarships are available based limited number of scholarships will be awarded. I understand that scholarships will be granted based on financial need I acknowledge that if granted a scholarship, I will be required to volun needed during the season in which the scholarship is received. These et to Endless Summer Soccer Tournament, Halloween Kick-or-Treat, Cincil understand that I will have to reapply each season for a scholarship is	teer at all local BUSC events as vents include, but are not limited o De Mayo, Fun Day, etc.
Parent/Guardian's Signature	Date:
Parent/Guardian's Signature Parent/Guardian's Signature	Date:
Please complete this scholarship application and submit it along with	