



The City of Yonkers Department of Parks, Recreation and Conservation Community Recreation Scholarship Application

PURPOSE

The Community Recreation Scholarship is meant to assist those who would not normally be able to participate in Parks, Recreation and Conservation Department programs by supplementing the program fees with scholarship funds made available for City of Yonkers residents.

ELIGIBILITY CRITERIA

- Must be a City of Yonkers resident
- Must be for a child between the ages of 6 months and 14 years
- Must meet the financial qualifications
- Must have a complete application on file prior to registration in the program

SCHOLARSHIP COMMITMENT

- \$150 scholarship towards one 3-week session of Summer Pre-K Camp
 - Eligible ages 3-4 years old - **5 scholarships available per year**
- \$250 scholarship towards Camp Rays Summer Camp
 - You must register for 3 of the one-week sessions available
 - Eligible ages 5-14 years old - **20 scholarships available per year**
- \$100 scholarship towards one 3-week session of Camp Pride Summer Camp
 - Eligible ages 5-21 years old - **5 scholarships available per year**
- \$150 scholarship towards one cycle of Tot, Skate 1 or Skate 2 Ice Skating Lessons; or Hockey Clinic
 - Eligible ages 4-14 years old - **20 scholarships available per year**
- \$110 scholarship towards one cycle of Youth Learn to Swim Classes
 - Eligible ages 6 months – 12 years old - **30 available per year**
- \$975 scholarship towards one 5 day session of Little Learners
 - Eligible ages 3-4 years old - **3 scholarships available per year**

APPLICATION INSTRUCTIONS

- Scholarships available first-come, first serve to those who meet the criteria
- Applications must be received prior to registration
 - Camp Rays, Camp Pride, and Pre-K Camp
 - Application period opens: January 1; Application deadline: March 31
 - Little Learners
 - Application period opens: April 1; Application deadline: June 30
 - Skating and Swimming Classes
 - Applications accepted year-round but must be submitted a minimum of 2 months prior to requested session
- Applicants may only use this application form
- Must have an account with the Parks, Recreation and Conservation Department on-line at register.communitypass.net/yonkers
- All income verifications must be submitted with the application (all that apply)
 - Prior years tax return
 - Food Stamps current Notice of Action letter
 - Current SSI statement

All applications are to be submitted to:

Director of Recreation • 285 Nepperhan Avenue • Yonkers, NY 10701

For more information please call (914) 377-6436 or email jennifer.kearins@yonkersny.gov



The City of Yonkers
 Department of Parks, Recreation and Conservation
Community Recreation Scholarship Application

APPLICANT CONTACT INFORMATION

Applicant's Last Name

Applicant's First Name

Applicant's Address

Applicant's Phone Number Applicant's Email Address

NAMES AND AGES OF CHILDREN

CHILD'S NAME	AGE	PROGRAM OF INTEREST
#1		
#2		
#3		

INCOME ELIGIBILITY REQUIREMENTS

RESIDENCY: Applicants must live in Yonkers
INCOME: Applicant's household must have an income equal to or less than 200% of the current federal poverty level as determined by the U.S. Department of Health and Human Service's Federal Poverty Guideline.

HOUSEHOLD INCOME ELIGIBILITY

Total Annual Household Income

Number in household: Adults Children (under 18)

Are you receiving funding from any other sources?
 No Yes; please explain:

DECLARATION (Please read and sign)

I hereby state that the information I have provided in this application is true and correct. I agree to provide proof of income. I agree to inform the Director of Recreation if I no longer qualify to receive the scholarship discount. I understand the participant may be withdrawn from the program and become ineligible for future scholarships due to "no show," excessive absences or excessive late withdrawals. I will abide by the requirements of the Scholarship Agreement.

Signature _____ Date _____

OFFICE USE ONLY:

() Approved: Commissioner _____ Deputy Commissioner _____
 Awarded: Transaction Date and Number: _____
 () Denied: Commissioner _____ Deputy Commissioner _____