



## Family or Individual Application for Scholarship

June 2023 – June 2024

Total Number of People in Household:		For PRESCHOOL & SCHOOL-AGE CARE Scholarships COMPLETE Page 2	
<i>The categories below are used for statistical purposes only</i>			
Household Member's Name(s):	Birthdate:	Gender:	Ethnicity:
		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Gender _____	<input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Two or More Races <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> Native Hawaiian/Pacific Islander
		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Gender _____	<input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Two or More Races <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> Native Hawaiian/Pacific Islander
		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Gender _____	<input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Two or More Races <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> Native Hawaiian/Pacific Islander
		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Gender _____	<input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Two or More Races <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> Native Hawaiian/Pacific Islander
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### Verification of Household Income and Dependent Eligibility - Attach Copy of Documents

**Total Family Income** (all adults in household) \$ \_\_\_\_\_  Yearly or  Monthly

<input type="checkbox"/> Preferred method for income verification: <b>2022 1040 Income Tax forms – page 1 and 2 required</b>	<input type="checkbox"/> If household / family dependent(s) are not listed on 1040, attach birth certificate for proof of dependency	<input type="checkbox"/> If no 1040, other accepted forms of income verification and dependency are listed on "How to Complete your Scholarship Application"
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### Main Contact – Adult Head of Household Information:

Name:	Last	First	
Address:	Street Address		
	City		Apartment/Unit
	State	ZIP Code	
Contact Info:	(    )	Phone	Email

*Email completed application & 2022 1040 tax return/documents to [scholarship.parks@seattle.gov](mailto:scholarship.parks@seattle.gov) (black out all social security & bank routing #s)  
 Scholarship qualification level begins on the date the application is processed/approved. There are no retroactive scholarships for previous registrations.*

### SEATTLE PARKS and RECREATION USE ONLY

Site:	Print Staff Name:	Date:
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### SCHOLARSHIP OFFICE USE ONLY

Scholarship %:	Aquatics %:	Approved by:	Date:
Notes:			

# Preschool and Licensed School-age Care Requests

**2023 SUMMER and 2023-2024 SCHOOL YEAR**

Preschool Age: 3-4 & 4-5 years; AND Licensed School-age Care Age: 5 (Kindergarten)-12 years

<b>Child's Last Name:</b>		<b>Child's First Name:</b>	
<b>Select <u>SUMMER 2023 School-age Care</u> Ages 5-12 only</b>		<b>Select <u>SCHOOL Year 2023-2024</u> Ages 5-12 only</b>	
<b>Select <u>PRESCHOOL 2023-2024</u> Ages 3-5 only</b>			
Child Care Site: _____		Child Care Site: _____	
<input type="checkbox"/> Week 1 July 3-7 short week-no 7/4 <input type="checkbox"/> Week 2 July 10-14 <input type="checkbox"/> Week 3 July 17-21 <input type="checkbox"/> Week 4 July 24-28 <input type="checkbox"/> Week 5 July 31-Aug 4 <input type="checkbox"/> Week 6 August 7-11 <input type="checkbox"/> Week 7 August 14-18 <input type="checkbox"/> Week 8 August 21-25 <input type="checkbox"/> Week 9 August 28-30 short week		<input type="checkbox"/> After School Care <input type="checkbox"/> M-F <input type="checkbox"/> MWF <input type="checkbox"/> TTh <input type="checkbox"/> Winter Break Week 1 (2023) <input type="checkbox"/> Winter Break Week 2 (2023) <input type="checkbox"/> Mid-Winter Break (2024) <input type="checkbox"/> Spring Break (2024) <input type="checkbox"/> Professional Development Days <input type="checkbox"/> November Conference Days <input type="checkbox"/> Day Between Semesters	
		<b>Summer Preschool</b> <input type="checkbox"/> Jefferson <input type="checkbox"/> Loyal Heights <input type="checkbox"/> Magnolia <input type="checkbox"/> Queen Anne  <input type="checkbox"/> Wk 1 July 3-7 (short week) <input type="checkbox"/> Wk 2 July 10-14 <input type="checkbox"/> Wk 3 July 17-21 <input type="checkbox"/> Wk 4 July 24-28 <input type="checkbox"/> Wk 5 July 31-Aug 4 <input type="checkbox"/> Wk 6 August 7-11 <input type="checkbox"/> Wk 7 August 14-18 <input type="checkbox"/> Wk 8 August 21-25	<b>School Year Preschool</b> Days per Week: ____  <input type="checkbox"/> Ballard; 5dys <input type="checkbox"/> Loyal Heights <input type="checkbox"/> Queen Anne; 5dys <input type="checkbox"/> Discovery Park <input type="checkbox"/> Other _____

<b>Child's Last Name:</b>		<b>Child's First Name:</b>	
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