Warwick Soccer Association
Scholarship Program

General Information: The Warwick Soccer Association (WSA) provides reduced registration fee scholarships to help eligible youth participate in our Recreational and Competitive programs (Indoor Season is ineligible). Since the amount of Financial Aid is nominal, the Financial Aid Committee will determine the requirement on a case-by-case basis. **Acceptance into the WSA financial aid program does not provide full payment of a player's registration fees. Awards are given to cover 50% of the registration fees. The WSA has established a limited fund to assist players. Fee assistance will be based on the number of applicants and available funds.** The participant will typically be required to pay the Competitive player fee assessed to WSA by Soccer Rhode Island as a condition of receiving assistance.

Procedure: Financial Aid is considered a personal and confidential matter. The family's ability to pay and the granting of Financial Aid will be the responsibility of the WSA Financial Aid Committee and the President. Their findings and recommendations will be documented and filed. Any documents containing personal and confidential information will be shredded as soon as administratively feasible following the completion of each session in which Financial Aid has been awarded. These documents are not for general viewing by Board Members unless a dispute is brought to the Board in writing. At this point, the full Board will review the documents and vote on allowing financial aid to stand as-is or to be modified or revoked. A family is not required to re-pay Financial Aid if the Board modifies or revokes the aid unless the application contained fraudulent or inaccurate information. Financial aid will only be awarded for one season/session. Subsequent aid will require a new application. Applications for assistance must be made via the attached form.

Eligibility: There are two methods by which an applicant will be considered for a scholarship.

Method 1:
If the child/family qualifies for or is currently receiving assistance from one or more of the following programs listed below:

* Free or Reduced School Lunch
* Foster Care
* Food Stamps
* Temporary Assistance for Needy Families
* Medicaid/Social Security Income

Method 2:
For cases where the family does not participate in the programs outlined under Method 1, requests for financial assistance can be submitted in writing to the Financial Aid Committee with priority given to eligible youth meeting one or more of the criteria below:

* Recent layoff or illness
* Living in a single parent home
* Member of a multi-child family

WSA FINANCIAL ASSISTANCE PROGRAM APPLICATION

Parents: Complete this form and submit it to WSA. Submit one application per child, per season.

Child's Name:	Parent/Guardian's Name:
Gender:	Address:
Date of Birth:	Daytime Phone:
School:	Evening or Cell Phone:
Grade:	E-Mail Address:

For which season is your child registered to play? Please circle one choice.
Spring Instructional / Spring Competitive / Fall Recreational / Fall Competitive

REQUEST FOR FINANCIAL ASSISTANCE (check one):
____ Method 1*: My child is currently enrolled in a public assistance program such as Free or Reduced Lunch, ADC, Foster Care, or Medicaid. I request financial assistance towards the registration fee and I understand that I must submit proof that I am receiving services.

CONSENT TO EXCHANGE INFORMATION: I understand that information may be needed to verify eligibility for this program and to coordinate services with other agencies; therefore, I agree that agencies may share my child's information. I certify that the information supplied is true and correct and that WSA staff have my permission to verify the information on this application.
Signature of Parent/Guardian _____ Date: _____
*A non-returnable copy of official documentation signifying that the child is receiving aid must be attached.

If documentation is not available, the following section must be completed and signed by a school counselor or administrator, case worker, or other official.
I verify this applicant meets the scholarship guidelines as specified above.
Name of Official Verifying Aid: _____

Signature:_____

Position: _____ Phone:_____

____ Method 2: My child is not currently enrolled in a public assistance program, but I am requesting a scholarship for the following reasons (use reverse if more space is needed):
_____
_____
_____
_____
_____
Monthly Gross Income*: _____
*If currently employed, please attach proof of income (ie; copy of pay stub)

WSA Financial Aid Program Participation Requirements:
1. A completion of a registration form is required prior to final awarding of the scholarship. For multiple family participants, one (1) application must be completed for each proposed scholarship applicant. Scholarship applications must be completed for consideration. All required information lines must be filled in completely and accurately.

2. Scholarships will be reviewed and awarded to only those applicants who file an application before the application deadline, which is typically the first day of the relevant season/session.

3. Each scholarship application is for one season/session. WSA reserves the right to limit the number of scholarships based upon funds available.

4. Scholarships are also subject to space availability for each age group. In order to provide a fair distribution of scholarship funds some children in a family may not be granted a scholarship so that we may serve as many families as possible.

5. The signature on the scholarship application form is an agreement that the parent / participant will pay the required reduced amount (50%) for the program.

6. Any fees due WSA MUST be paid in full at the reduced rate before the start date of the program or the participant will not be allowed to attend.

7. Participants must meet the minimum participation guidelines or risk eligibility for future programs.
*For recreational programs, a 50% participation rate is required.
*For competitive programs, an 80% participation rate is required and parents/guardians agree to the commitment of competitive traveling soccer, including, but not limited to, practices and tournaments.

8. If a scholarship is awarded to a child for a season and the child quits playing the sport, the child will not be eligible to receive another scholarship for 1 year from the date of the completion of the season/session.

9. WSA reserves the right to require the participation by a family member in at least **one (1) volunteer opportunity** during the scholarship season as prescribed by the President /Scholarship Committee. Please let WSA know any skills that you possess and/or positions you would like to fill (ie; coaching, field marshall, snack shack attendant)

_____
_____
_____
_____

I understand and agree to the above Requirements.

Signature of Parent/Guardian _____
Date:_____