

UTAH FC

SCHOLARSHIP APPLICATION

Player: _____ **Date:** ____/____/____

Parent/Guardian: _____ **Cell Phone:** _____

Street: _____ **City/Zip** _____

Email: _____

An application for scholarship assistance is certification that the above player will not be able to participate in the program without financial assistance. All applications will be reviewed by the Utah FC Scholarship Committee. Applications will be due by July 1 (Fall & year-round players) and Jan 1 (Spring only players). Applicants will be notified in a timely manner of the committee's decision. Submit the completed application in a sealed envelope marked "Scholarship Application" and turn in to the current Club Administrator or email them to utahfc@gmail.com by the above mentioned dates.

UTAH FC asks that all approved applicants volunteer 1 hour of time per every \$15 fee paid by at a UTAH FC event such as: Utah Invitational Tournament in July, Utah FC Night or Club Tryouts or another approved event/service.

Scholarships granted will only be applied once volunteer time has been met and the following fees have been paid for:

- UYSA Registration Fees
- Uniform Fees
- Team Fees (Referee fee, Field fee, Equipment Fee)

Note: In addition to the above listed fees, scholarship money does not cover:

- Tournament Fees
- Winter Training Team Fees

In the space provided, give a brief explanation of the family financial situation that prompts the scholarship application. (Use the back if more space is needed)

Monthly income:

Current household number:

Parents Commitment

I understand that if my child receives Utah FC scholarship dollars that I will participate/volunteer my time to the team or club when possible. I understand that if my child leaves Utah FC during the 2017-18 year. I will be responsible to return scholarship funds to Utah FC.

I declare to pay all UTAH FC fees listed above that are not covered by scholarship money, that this information is true and agree to volunteer time as stated above at an approved club activity.

Signature of
 Parent/Guardian: _____

UFC SCHOLARSHIP COMMITTEE USE ONLY

Signature of
 UFC Board Members (2): _____

Scholarship Amount
 Awarded \$

Date: _____

Event/Service	Event/ Service Date	Hour(s)	Amount Earned	Amount Left to Earn	Discounted	Discounted Date
			\$	\$		

