

CITY OF SAN MARCOS
YOUTH ACTIVITY SCHOLARSHIP PROGRAM
ELIGIBILITY DOCUMENTATION FORM 2019-2020



NOTICE TO PARENT OR GUARDIAN:

The City requires that the child receiving a *Youth Activity Scholarship* is from a family with a yearly income that is considered to be low to moderate, based on the number of family members who live in the child's home. Scholarships are limited in number and will be awarded on a first come, first served basis. Eligibility does not guarantee assistance. Assistance does not guarantee program registration. **Participants must pay one-half of all program fees.** Youth Activity Scholarship recipients will receive up to \$150 per child to be used for enrollment in any of our recreation programs. Registration and payment for programs must occur on or before September 30, 2020 to qualify.

A scholarship is requested for:

Child Name: _____

Age: _____

School attended by this child: _____

Home Address: _____

This child is eligible based on the following:

Family Size: _____ (how many family members live in this child's home-including child)

Family Income for the Year: _____ (total income for all adults from all sources before taxes).

Has this child received the Youth Activity Scholarship in the past? (circle one) Yes No

Return applications and eligibility documents to the Parks and Recreation office at:

401 E. Hopkins St.

Or by mail to:

**San Marcos Parks and Recreation
Youth Activity Scholarship Program**

**630 E. Hopkins
San Marcos, TX 78666**

FORM CONTINUED ON NEXT PAGE

DEMOGRAPHIC INFORMATION:

Answers to the following questions about the child requesting a scholarship are not used to determine program eligibility.

1. **Sex:** Male Female

2. **Ethnicity:** (Choose one)

Hispanic

Non-Hispanic

3. **Race:** (Choose one)

Asian

American Indian/Alaskan Native/White

Asian/White

American Indian/Alaskan Native/Black/African American

Black/African American

Native Hawaiian/Other Pacific Islander

Black/African American/White

Other/Multiracial

American Indian/Alaskan Native

White

4. **Special Needs**

The child is a person with a disability

There is a person with a disability living in the household

5. **Female Head of Household?** Yes No

6. **Elderly (62 or older) Person in Household?** Yes No

This application is submitted by:

Parent/Guardian Name (please print): _____ Phone: _____

By signing below I certify that to the best of my knowledge and belief this information is true and correct.

Parent / Guardian Signature

Date

WARNING: TITLE 18, SECTION 1001 OF THE U. S. CODE STATES THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING A FALSE OR FRAUDULENT STATEMENT TO A DEPARTMENT OF THE U. S. GOVERNMENT. THE INFORMATION ON THIS FORM MAY BE SUBJECT TO VERIFICATION BY THE CITY AT ANY TIME.

San Marcos Housing Authority Confirmation (if applicable):

I confirm that the child listed above is a resident of housing provided by the Housing Authority as of this date.

The family's household income = 30% 50% 80%

Signature of SMPHA Employee

Printed Name, Title

Date

Income Limits for the Austin - Round Rock Metropolitan Statistical Area (MSA)

Fiscal Year (FY) 2019 Median Family Income = \$95,900 ADJUSTED INCOME LIMITS BY HOUSEHOLD SIZE			
Household	Very Low	Low	Moderate
	(30% Limits)	(50% Limits)	(80% Limits)
1 person	\$19,900	\$33,150	\$52,850
2 persons	\$22,750	\$37,850	\$60,400
3 persons	\$25,600	\$42,600	\$67,950
4 persons	\$28,400	\$47,300	\$75,500
5 persons	\$30,700	\$51,100	\$81,550
6 persons	\$32,950	\$54,900	\$87,600
7 persons	\$32,250	\$58,700	\$93,650
8 persons	\$37,500	\$62,450	\$99,700
9 persons	\$39,800	\$66,250	\$105,700
10 persons	\$42,050	\$70,050	\$111,750
11 persons	\$44,350	\$73,800	\$117,800
12 persons	\$46,600	\$77,600	\$123,850
13 persons	\$48,850	\$81,400	\$129,900
14 persons	\$51,150	\$85,150	\$135,900
15 persons	\$53,400	\$88,150	\$141,950

Effective June 28, 2019