



## Oceanside Pop Warner Football & Cheer **2022 Scholarship Program**

Oceanside Pop Warner is proud to serve the Oceanside community, offering a Football and Cheerleading program. Part of this service includes a scholarship program for deserving families in the community we serve, so that every child has the opportunity to participate regardless of his or her family income. The number of sponsorships we provide will be limited only by our financial ability to provide them. Our goal is to help every deserving family that we can. It is possible that we may get more applications than we can support, so they will be accepted and reviewed on a first-come first serve basis.

Oceanside Pop Warner encourages providing the opportunity for all youth to participate in and enjoy the Pop Warner experience. To that end, the sponsorship program is offered for those meeting the requirement as described herein.

Scholarship funds are intended to cover **partial** registration costs for families with legitimate financial reasons. All Scholarship applications and supporting documentation are DUE BY first in person registration. Tentative date in March 2022. No Exceptions.

- Residents within the Oceanside Unified School District are given first priority and funds are distributed on a first come, first served basis to applicants that provide application with all the necessary documentation to determine income by first in person registration, tentative date in March 2022.
- You must register in person with a payment of \$100.
- Any incomplete scholarship application will be declined. Any application missing the required, supporting documentation will be declined.
- All information provided in the scholarship application is confidential and will not be released to others.
- Once a scholarship recipient is registered for OPW, participation in the full program session is required. Withdrawal from the program for any unexcused reason will result in scholarship ineligibility for one year.
- Scholarship applications will be reviewed, and applicants will be notified of the availability of funds as they are approved on a first come first serve priority system.
- Payment for any fees not covered by sponsorship will be due by July 16, 2022.
- Sponsorship funds are for youth under the age of 15.
- Oceanside Pop Warner reserves the right to limit the number of scholarships based upon funds available and to decline funding for those applicants who do not meet the scholarship program requirements.
- Scholarship applications and supporting documentation should accompany registration forms and may be ONLY submitted at walk-up registration (see dates on website).

Thank you for your interest in the scholarship program. All information submitted to OPW Scholarship Committee will be held in strict confidence. Questions may be addressed via email at [ExecutiveBoard@oceansidepopwarnerfootball.org](mailto:ExecutiveBoard@oceansidepopwarnerfootball.org). Please review the application carefully and complete all sections. Incomplete applications will not be accepted.

## **Oceanside Pop Warner Football & Cheer Association**

PO Box 2415, Oceanside, California 92051

### **Financial Assistance Application**

#### **Minimum Requirements**

- 1.) The applicant must meet the minimum OPW participation requirements.
- 2.) Any person applying for financial assistance will be asked to pay \$100 of the program fee.
- 3.) One page essay from football/cheer applicant, title "Why do you want to play football or cheer?"
- 4.) Not required but taken into consideration- a list of volunteer hours with authorized signatures or letter from association.

#### **Selection Process**

- 1.) Financial Assistance will be made available based on need, if funds are available, and based on the order in which the completed financial assistance application is received.
- 2.) The OPW Scholarship Committee reviews current Financial Assistance commitments and the availability of contributed funds to support financial requests.

#### **Duration and Continuation**

- 1.) Financial Assistance will be granted for the 2022 Football/Cheer season only.
- 2.) Once a scholarship recipient is registered for OPW, participation in the full program session is required. Withdrawal from the program for any unexcused reason will result in scholarship ineligibility for one year.
- 3.) Late payment of program fees or failure to comply with the terms and conditions of the agreement by the recipient will result in OPW discontinuing financial aid and the participant(s) will be removed from the OPW Program(s).

#### **Selection Criteria**

The income guidelines listed below have been adopted from the state school lunch program, and have been adopted by OPW as the financial guideline for the 2022. (This is from previous years as school lunches are free this year.)

These income guidelines are based on the following pre-tax annual income as follows:

1-2 Person Household: \$28,350

3 Persons: \$36,450

4 Persons: \$40,500

5 Persons: \$43,750

6 Persons: \$47,000

Add \$6,200 for each additional household member.

**How to apply**

If you meet the minimum requirements, fill out the attached application. You must provide the most recent copy of your federal income tax return and 3 current pay stubs. If you are currently unemployed and/or on disability and are applying for financial assistance you will need to provide a letter explaining why you believe financial assistance is warranted for your family along with a copy of your unemployment and/or disability benefits payment summarization.

**Oceanside Pop Warner Football Association**

**Financial Assistance Information**

Father's Full Name: \_\_\_\_\_

Living at home? \_\_\_\_ Address \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Employer \_\_\_\_\_ Work Number \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_

Living at home? \_\_\_\_ Address \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Employer \_\_\_\_\_ Work Number \_\_\_\_\_

Number of person(s) in household under 18 years of age \_\_\_\_\_

Number of person(s) in household over 18 years of age \_\_\_\_\_

First person for which financial assistance is being requested:

Name: \_\_\_\_\_ Age \_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_

Grade in school \_\_\_\_\_ Email: \_\_\_\_\_

Address \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Second person for which financial assistance is being requested:

Name: \_\_\_\_\_ Age \_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_

Grade in school \_\_\_\_\_ Email: \_\_\_\_\_

Address \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Third person for which financial assistance is being requested: Name: \_\_\_\_\_

Age \_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_

Grade in school \_\_\_\_\_ Email: \_\_\_\_\_  
Address \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fourth person for which financial assistance is being requested: Name: \_\_\_\_\_  
Age \_\_\_\_ Date of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Grade in school \_\_\_\_\_ Email: \_\_\_\_\_  
Address \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

\*\*All information provided to OPW will be held in strict confidence.

Annual Household Income (check one)

Under \$10,000 \_\_\_\_\_ \$30,000 - \$40,000 \_\_\_\_\_

\$10,000 - \$20,000 \_\_\_\_\_ \$40,000 - \$50,000 \_\_\_\_\_

\$20,000 - \$30,000 \_\_\_\_\_ over \$50,000 \_\_\_\_\_

Include a copy of your most recent copy of your federal income tax return and pay check stub. You may also supply one of the following, if applicable, to support your request for a sponsorship:

Medi-Cal # \_\_\_\_\_

AFDC # \_\_\_\_\_

Food Stamps # \_\_\_\_\_

Foster Care # \_\_\_\_\_

Are you currently receiving any local, state or federal assistance? No \_\_\_\_ Yes \_\_\_\_ if yes:

What kind? \_\_\_\_\_ Case Number \_\_\_\_\_ Monthly Amount \_\_\_\_\_

Are you currently unemployed? No \_\_\_\_ Yes \_\_\_\_

Are you currently paying child support? No \_\_\_\_ Yes \_\_\_\_ If yes: Monthly amount \$ \_\_\_\_\_

Have you previously received scholarship(s) from OPW? Yes \_\_\_\_ No \_\_\_\_

Please explain in detail the circumstances that make a scholarship necessary. You may attach a separate sheet, if needed.

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I have read and understand the information provided.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*All information provided to OPW will be held in strict confidence.

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For OPW use only

Amount of Scholarship \_\_\_\_\_

Approved By: \_\_\_\_\_ Date Approved \_\_\_\_\_



**Oceanside Pop Warner Football & Cheer Association**

PO Box 2415, Oceanside, California 92051

**Financial Assistance Agreement**

Name of Applicant \_\_\_\_\_

Applying for (Children's name) \_\_\_\_\_ The purpose of the financial assistance program is to provide partial financial assistance for OPW registration expenses to participant families in the Oceanside Unified School District area, and who wish to take part in the OPW football or cheer program and believe they are unable to afford the full cost of the program. Financial assistance is made possible by contributions made to the OPW Football Association through annual fundraising campaigns and donations from corporate, business and personal contributions. I understand the terms of the OPW Football Association financial assistance agreement as follows: 1.) Financial assistance is provided based on the availability of funds, amount of space within requested programs and the number of people seeking assistance. 2.) The OPW Football Association reserves the right to reduce or eliminate aid based upon availability of funds and participant eligibility. 3.) The OPW Football Association has the right to recover the cost of aid provided if any information is received which verifies recipient had the ability to pay or falsified any statements or supporting documentation, or failed to notify the OPW Football Association of any change of household status, income or other related financial information. 4.) Financial assistance recipients must adhere to OPW Football Association policies such as those included in the application packet and OPW policies and procedures manual (available upon request). 5.) Because funds for registration assistance are provided from our annual support campaign, we expect that members accepted for assistance will be active participants in the program. 6.) Withdrawal from the program for any unexcused reason will result in loss of financial assistance for one year. 7.) As part of this scholarship agreement, I agree to abide by all the rules, regulations and guidelines set forth by Oceanside Pop Warner. Furthermore, I agree to put forth all necessary deposits required for equipment and volunteer duties. Should I fail to meet the requirements I agree to forfeit those deposits and they will be cashed by OPW.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

OPW Board Signature \_\_\_\_\_ Date \_\_\_\_\_

OPW Board Signature \_\_\_\_\_ Date \_\_\_\_\_