



DIABLO ROAD RUNNERS YOUTH SCHOLARSHIP FEE ASSISTANCE PROGRAM

The Diablo Road Runners Youth Scholarship Fee Assistance Program is to individuals who are in need of financial assistance to participate in a Martinez Recreation youth program. Scholarships are granted based on eligibility and will pay up to 50% of the activity fee, not including lab fees. A limit of \$75 in scholarships per eligible child is available each fiscal year (July 1 through June 30). ***Proof of income must be presented with this application.***

Eligibility Requirements

- Child must live within the Martinez City Limits or attend a school in the Martinez Unified School District
- Parents/Legal Guardian's must meet the minimum income requirements outlined on the application and must submit one of the supporting documents below as proof of income.

Supporting Document *(Must submit a copy of at least ONE with application)*

- Income tax (Current or prior year)
- Social Security
- Unemployment Benefits
- Documentation from a Government Assistance Program
 - (Example: SNAP, Medical, Medicaid, Lifeline, LIHEAP, etc.)

Funds for this scholarship are 100% provided by private donations and are **granted as long as funds are available**. Program applicants may submit applications year round for any advertised Martinez Recreation program. **Scholarship funds are available for City of Martinez Recreation programs only.**

PLEASE NOTE: Scholarship recipients are responsible for their own transportation to and from activity sites. If your child receives a scholarship, they must attend the program. *Failure to attend a program will result in temporary to permanent loss of future funding.*

CONTACT

For more information, please contact the Martinez Recreation Office at (925) 372-3510 or by email at recreation@cityofmartinez.org.



DIABLO ROAD RUNNER YOUTH SCHOLARSHIP APPLICATION

DATE: _____ New Applicant: Re-Apply:

SCHOLARSHIP APPLICANT INFORMATION			
Applicant First Name	Applicant Last Name	Date of Birth	School

PARENT/LEGAL GUARDIAN INFORMATION		
Parent/Legal Guardian First Name	Parent/Legal Guardian Last Name	Occupation

CONTACT INFORMATION	
Address/City/Zip	
Primary Phone	Work Phone
Email Address	

QUALIFYING GUIDELINES FOR SCHOLARSHIP APPLICATION								
Household Size	1	2	3	4	5	6	7	8
Household Income	\$47,950	\$54,800	\$61,650	\$68,500	\$74,000	\$79,500	\$84,950	\$90,450
<i>Example: If your family size is 2 and your household income is \$54,800 or less, you are eligible for a scholarship</i>								
# of People in Household				Annual Gross Income				
Does your family receive any government assistance? <input type="checkbox"/> No <input type="checkbox"/> Yes; <i>what type</i>								
Have you ever requested and/or received fee assistance from the City of Martinez? <input type="checkbox"/> Yes <input type="checkbox"/> No								

I hereby certify that the yearly family income indicated above represents all means of support from employment income and government assistance. I also declare that the content of the above information is true and correct.

Parent or Guardian Signature _____ Date: _____

ATTACH COPIES OF SUPPORTING DOCUMENTS TO THE SCHOLARSHIP APPLICATION	
<i>See front page for list of examples</i>	
SUBMIT BY MAIL:	SUBMIT VIA EMAIL
Martinez Recreation 525 Henrietta St. Martinez, CA 94553	Email application and supporting documents to recreation@cityofmartinez.org

OFFICE USE ONLY		
Date Submitted	Year	COMMENTS:
Approved	Denied	
Amount: \$	Approved by	