



FRUITA PARKS AND RECREATION YOUTH SCHOLARSHIP PROGRAM

Staff Use Only
Date Received:

General Information

The Fruita Parks and Recreation Scholarship Program is designed to aid youth in the community who are in need of financial assistance in order to participate in recreational sports and activities.

Application Process

Applications will be accepted up until **two weeks prior to the program start date.**

All applications must be signed by a parent/guardian of the applicant. Please use ink only when filling in the form by hand. Incomplete forms will not be considered.

Applications should be submitted to:

Fruita Parks and Recreation
324 N. Coulson St.
Fruita, CO 81521

Fax: (970) 858-9540
Phone: (970) 858-0360

Eligibility

- Must be under 18 years of age
- Live in Mesa County (proof of residency required)
- Provide a current Free/Reduced Lunch approval letter from School District #51 or a verifiable & current Medicaid Card, Marillac Clinic Card, or CHP + card.
- Provide a new application for each program

Award Process

Scholarship distribution will be determined by Recreation Staff on a case-by-case basis. Scholarship funds are limited. If funds are depleted, all applications will be placed on hold until further funding is received. Funds will be distributed on a first come, first serve basis. Scholarships will only be awarded for youth programs. **Scholarships for passes at the Fruita Community Center are not available at this time.**

Registration Process

Approval of scholarship application does not automatically register the individual into the program of choice. Once the scholarship has been awarded, a staff member will reach out to get the individual signed up for the desired program. **Please fill out and sign the attached application form.**

Privacy Policy

Information submitted throughout the application process will remain confidential.



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Application

A separate scholarship application form must be submitted for each child. Please submit completed applications and proof of eligibility at least two weeks prior to the requested program start date.

Child's Name: _____ Date of Birth: _____

Address: _____

Program Requested: _____

Parent/Guardian's Name: _____ Email: _____

Phone (Daytime): _____ Phone (Evening): _____

Has the applicant applied for a Fruita Parks and Recreation Scholarship before?

____ Yes If yes, when? _____

____ No

Has the applicant been awarded a Fruita Parks and Recreation Scholarship before?

____ Yes If yes, when? _____

____ No

Has an immediate family member been awarded a Fruita Parks and Recreation Scholarship before?

____ Yes If yes, when? _____

____ No

I certify that all of the information provided on this form is true and correct. I understand that city officials may verify information on this application and that deliberate misrepresentation of the information may subject me to disqualification for the Fruita Parks and Recreation Scholarship. Facsimile, electronic and counterpart signatures are binding as originals.

Signature: _____ Date: _____

Staff Use Only	
Date Approved _____	Date Denied _____
Percent of Scholarship Approved: _____	
Program Registered For: _____	
Fee \$: _____	Date: _____
Recreation Director: _____	