



LIV ON ATHLETIC SCHOLARSHIP APPLICATION

(Complete one application per child)

Sponsored by the family of Olivia Long

Available for young women grades K-8, for athletic activities



Olivia Long

Youth's Name: _____ Date: _____
 Address: _____ City, State, Zip: _____
 Birthdate: _____ School: _____ Grade: _____
 Parent/Guardian: _____ Day Phone: _____ Home Phone: _____
 Email address: _____

Financial Information

Number of Family Members in Household _____

Family Income Range

Under 14,597 \$34,726 – 39,757
 \$14,598 – 19,629 \$39,758 – 44,789
 \$19,630 – 24,661 \$44,790 – 49,821
 \$24,662 – 29,693 \$49,822 and above
 \$29,694 – 34,725

Source of Income

(Check all that apply)

Wages AFDC
 Unemployment Other
 Child Support
 Social Security

Skill Building Activity

What sports program are you interested in? _____

What benefits do you expect from this program? _____

Date of activity: _____ How often will youth attend? _____
 Service Provider Contact Person _____ Organization's Name _____
 Address _____ City, State, Zip _____ Phone _____

Funds Requested

Total Cost for Activity _____ Amount Family Will Pay _____

Amount Available From Other Sources _____ Source Name _____

Amount Of Assistance Requested _____

Is there any other information that you feel is important for the committee to consider? _____

A Copy of Any Available Written Information About the Activity Must Be Attached. (Brochure, flyer, etc)

Referral Source Name _____ Agency _____
 Address _____ City, State, Zip _____ Phone _____

 Parent/Guardian Signature Date

Please return all completed application forms to:
 Orion Area Youth Assistance 248-693-6878
 455 E. Scripps Road Fax: 248-693-1494
 Lake Orion, MI 48360
 oaya@lok12.org

 Board Approval Date