



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 who live in Lake Orion School district



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 \$43,950 \$63,701 – \$68,100
 \$43,951 – \$49,450 \$68,101 – \$72,500
 \$49,451 – \$54,900 \$72,501 and above
 \$54,901 – \$59,300
 \$59,301 – \$63,700

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