

North Lake Little League Scholarship Application

Applicant Information:
• Child's Name:
Child's Age: Parat (Constitution Name)
Parent/Guardian Name: Parent Contact Information:
 Parent Contact Information: Phone:
o Email:
Address:
Current School:
Financial Assistance Information:
Type of Assistance Needed: Please select one
 [] Low-Income Family Assistance: (e.g., qualify for social services like free or reduced lunch) [] Financial Hardship Assistance: (e.g., currently facing temporary or unforeseen financial challenges.
For Low-Income Family Assistance Applicants:
Are you currently receiving any social services? (e.g., Free or Reduced Lunch, SNAP, WIC)
o [] Yes
o [] No
 Proof of Participation: Attach a copy of your enrollment in the specified programs if available
For Financial Hardship Assistance Applicants: Description of Financial Hardship:
Above, please provide a brief explanation of your current financial hardship and include any relevant supporting documents if possible.
Additional Information (All Applicants):
Benefit of Scholarship: How will this financial assistance impact your child's participation in NLLL?
• Other Considerations: Are there any other circumstances or details you would like the committee to consider?
<u>Declaration:</u> I certify that the information provided is true and accurate to the best of my knowledge. I understand that this application will be treated with <u>confidentiality</u> and used solely for the purpose of determining eligibility for financial assistance.
manda assistance.
Parent or Guardian's Full Name:
Email: Phone #:

Return the form to: Registrar@northlakell.org & Treasurer@northlake.org