SWAMPSCOTT LITTLE LEAGUE

http://www.swampscottll.org

Scholarship Application

Swampscott Little League ("SLL") aims to ensure that no player is turned away because of financial need. Through our Scholarship Program, we work discreetly and confidentially to help families procure financial assistance so that their child or children can play baseball or softball.

SLL requests that parents/guardians who receive financial assistance commit to volunteer to help SLL in recognition of the financial commitment SLL has made to the applicant's family. The financial assistance covers the registration fees only for one season in whole or in part. Generally, the assistance does not cover player equipment or uniform accessories such as socks, pants, or belts. SLL recommends a minimum $25 per player contribution from those receiving a financial scholarship.

Volunteer Commitments Guidelines	
Full Scholarship (per child)	6 evening or weekend day shifts (2 hrs. each) volunteering in the concession stand or participating in field maintenance, fundraising, coaching, or other.*
Partial Scholarship (per child)	3 evening or weekend day shifts (2 hrs. each) volunteering in the concession stand or participating in field maintenance, fundraising, umpiring or other.*
*This time may be divided among family members. Coaching commitment requires attending more than half scheduled games/practices.	

I am applying for the following assistance: Partial Scholarship Full Scholarship

Parent/Guardian's Name		Number of Children Registering This Year	Number of Children Requiring Scholarship	Age(s) of Children Requiring Scholarship	Amount You Can Pay in Total** ($25 Player Minimum, Other, None)
Mailing Address		Names of Children Requiring Scholarship			Home Phone
City	Zip Code	Email Address			Cell Phone

Below please provide the basis for your scholarship request. The Scholarship Committee (President & Player Agent) will keep the existence, nature and contents of this request confidential to the fullest extent possible. Please include all relevant information you believe the Scholarship Committee should consider in reviewing this application.

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Please sign and date below. By doing so you are indicating you understand and agree to the "Volunteer Commitments Guidelines" description above. This application will not be processed without a parent or guardian signature.

Signature: _____ Date: _____

Please send completed form to both:

Nicole McAdam (President SLL) at nmcadam418@gmail.com

Tim Knauer (Player Agent) at tknauer@gmail.com

League Use Only

Last updated – 1/19/2024

Approved ____

Denied ____