

**RSU5 Community Programs**  
**Durham-Freeport-Pownal**  
**17 West Street \* Freeport, ME 04032 \* 207-865-6171**

Program Scholarship Application

**To be considered for a scholarship, completed applications must be returned to RSU5 Community Programs at least two weeks prior to the start of the program.**

Scholarships are awarded based on guidelines for free and reduced school lunch and other programs listed below. Not all Community Programs are eligible for scholarships. Scholarships will only be considered for families that reside in Durham, Freeport, or Pownal.

**A partial contribution from the family/guardians is required with most scholarship funding.**

Date of Application:

Name of Participant:

Age of Participant:

Parent/Guardian Name(s):

Mailing Address:

Primary Phone:

Secondary Phone:

Email:

**Does any member of your household receive any of the following assistance?**

Free or reduced school lunch	Yes___ No___
SNAP (Supplemental Assistance for Needy Persons)	Yes___ No___
TANF (Temporary Assistance for Needy Families)	Yes___ No___
FDIPR (Food Distribution Program on Indian Reservations)	Yes___ No___
MaineCare or CubCare	Yes___ No___
Maine Child Care Subsidy Program	Yes___ No___
Maine Housing or General Assistance	Yes___ No___

**Names and ages of people living with applicant (both family and non-family members):**

_____	_____
_____	_____
_____	_____
_____	_____

Total # of Adults\_\_\_\_\_

Total # of children\_\_\_\_\_

**Please explain the circumstances under which you are applying for a scholarship. Include any extenuating family circumstances that should be considered.**

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**List programs for which you are applying for a scholarship:**

<u>Program name</u>	<u>Course #</u>	<u>Program fee</u>	<u>Amount you are able to pay</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I hereby authorize RSU 5 Community Programs to contact appropriate officials to determine the accuracy of my financial need as described above. I hereby affirm that the facts in the application are true, correct, and complete and that I have not knowingly withheld any information. I agree that if a scholarship is approved, I will be committed to the program policies, requirements, and rules. If for any reason I fail to do so, the scholarship may be withdrawn. This includes, but is not limited to, poor attendance in the program and late pick-ups. I understand that I may be asked to pay the balance of any camps or programs not covered by this scholarship before the start of the program.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### **Fundraising Agreement**

I understand that in order to be eligible for a scholarship through RSU5 Community Programs, I must agree to participate in one or more fundraising activity, and that future scholarship applications will be considered only if my fundraising commitment has been met. I/we agree to help with the following activities:

\_\_\_\_ Great Osprey 10K Road Race    \_\_\_\_ Hand to Hand Food Drive    \_\_\_\_ Coaching/Instructing  
\_\_\_\_ iSpy Scavenger Hunt            \_\_\_\_ Other as needed

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

For Office Use Only

Scholarship Approved? \_\_\_\_\_ Scholarship Amount \_\_\_\_\_  
Authorized by \_\_\_\_\_ Date \_\_\_\_\_