

CASPER FAMILY YMCA

SCHOLARSHIP APPLICATION

Fill out the scholarship and membership application and membership application completely. Once filled out please mail the form to Casper Family YMCA ATTN: Jenniey Elliott, 315 E 15th Street, Casper, WY 82601 or drop it off at the front desk. You will be notified within 5 business days of the amount you qualify for. Scholarships are awarded on a 6 month basis. You have the choice of paying the entire 6 months up front, or signing up for a bank draft where the amount is automatically drafted from your account each month. At the end of that 6 month period you will be able to reapply if necessary.

		DATE			
Name		DOB			
Address					
City					
Phone (H)	(W)				
Email		_ Gender: Male	Female		
Place of Employment		Length of Employment			
Family Members					
	OB 2		DOB		
1 D	OOB 4		DOB		
5 D	OOB 6		DOB		
7 D	OB 8		DOB		
Have you ever applied for sch If yes, which YMCA and what					
Did you provide a volunteer s What volunteer service can y Why are you applying for sch	ou provide to our YM	1CA?			
What benefits do you see in lof participant?	_		A as a member		
Your present monthly househ	nold income is: \$				

Please itemize your monthly income and expenses:

INCOME	EXPENSE	
Wages, salaries & tips	\$ Rent/mortgage	\$
Unemployment compensation	\$ Utilities	\$
Social Security compensation	\$ Food	\$
Child Support	\$ Clothing	\$
Aid to dependent children	\$ Phone	\$
Food Stamps/SNAP	\$ Car/insurance	\$
401K/Retirement Funds	\$ Alimony	\$
Child Support	\$ Medical	\$
Alimony	\$ Child Support	\$
Other	\$ Other	\$

You must present last year's Internal Revenue Service Tax Statement and/or your SSI allocation statement to verify your annual earnings. If your current earnings vary greatly from the previous year please attach last year's Internal Revenue Service Tax Statement and verification of your current earnings. If you have no income, attach a brief note telling how you provide food, clothing and housing for your household and when you expect to receive income.

If you have any questions please contact Jenniey Elliott at (307) 234-9187 or jennieyl@yahoo.com.

Thank you!				
FOR OFFICE				
APPROVED MONTHLY SCHOLARSHIP AMOUNT				
YMCA MANAGER SIGNATURE				
MANAGER NAME	DATE			
MEMBERSHIP TYPE				
PAYMENT PLAN				

Thank you to the United Way of Natrona County and donors of our Strong Kids Campaign for making these scholarships possible at the Casper Family YMCA.



CASPER FAMILY YMCA FINANCIAL ASSISTANCE SLIDING SCALE

EFFECTIVE FEBRUARY 1, 2012

The table below shows annual household income as a percentage of the poverty guideline based on the number of people in a household. Financial assistance for membership and programming is based on this table.

% of Poverty Guideline	% of Financial Assistance
90% or less	90%
90%-100%	80%
100%-115%	70%
115%-125%	60%
125%-133%	50%
133%-150%	40%
150%-175%	30%
175%-200%	20%
200%-225%	10%

% Poverty Guideline	90%	100%	115%	125%	133%	150%	175%	200%	225%
Family Size									
1	\$9,801	\$10,890	\$12,524	\$13,575	\$14,484	\$16,335	\$19,058	\$21,780	\$24,503
2	\$13,230	\$14,710	\$16,917	\$18,388	\$19,564	\$22,065	\$25,743	\$29,420	\$33,098
3	\$13,707	\$18,530	\$21,310	\$23,163	\$24,645	\$27,795	\$32,428	\$37,060	\$41,018
4	\$20,088	\$22,350	\$25,703	\$27,938	\$29,726	\$33,525	\$39,113	\$44,700	\$50,288
5	\$23,553	\$26,170	\$30,096	\$32,713	\$34,806	\$39,255	\$45,798	\$52,340	\$58,883
6	\$26,991	\$29,990	\$34,489	\$37,488	\$39,887	\$44,985	\$52,483	\$59,980	\$67,478
7	\$30,429	\$33,810	\$38,882	\$42,263	\$44,967	\$50,715	\$59,168	\$67,620	\$76,073
8	\$33,867	\$37,630	\$43,275	\$47,038	\$50,048	\$56,455	\$65,853	\$75,260	\$84,668