

Recreation Commission Financial Assistance Program Policy

Scholarship@uptonma.gov

Upton Recreation assures that applicants will not be discriminated against on the basis of race, sex, religion, creed, color, national origin, disability, or age.

Application Guidelines:

- All applicants must be current Upton residents at the time of submission of application •
- All applications must be submitted within the guidelines laid out on the Town of Upton ٠ website. Any applications that do not follow the guidelines will not be considered
- All applications for financial assistance will be kept confidential by the scholarship committee •
- Applications will be considered on a "first come first serve" basis
- Not all Recreation Department programs are eligible for financial assistance ٠
- Applicants must meet one of the criteria listed below to be eligible to apply •
- Email applications and required documentation to Scholarship@uptonma.gov •

<u>Eligibility</u> (must meet at least **one** of the following criteria):

- Enrolled in the free/reduced lunch program at time of submission of application
- Enrolled in the SNAP program at time of submission of application •
- Household income at time of submission of application falls within the following thresholds: • * Household income can be submitted as first page of the most recent federal tax return or past three months' worth of bank statements

% of aid family may receive up to:		80%	100%
Family Size:	1	\$26,973	\$18,954
	2	\$36,482	\$25,636
	3	\$45,991	\$32,318
	4	\$55 <i>,</i> 500	\$39,00
	5	\$65 <i>,</i> 009	\$45 <i>,</i> 682
	6	\$74,518	\$52,364
	7	\$84,027	\$59,046
	8	\$93,536	\$65,728
or each additional family member	add:	\$9,509	\$6,682

For each ad

*Data pulled from: https://www.fns.usda.gov/cn/fr-020923



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THIS DOCUMENT IS CONFIDENTIAL

Any and all records, including names of families/children, related to requests for financial assistance are <u>EXEMPT</u> from the MA Public Records Laws per M.G.L. c. 4, § 7(26)(a)&(c) and M.G.L. c. 214, § 1B and is not to be released.

Application For Financial Assistance *If you are requesting assistance for multiple children, you may list them all on one form. Please attach separate documentation for each as required.					
Child's Legal Name:			Date:	:	
Parent/Guardian's Legal Name:					
Address:	(Town)	(State)	(Zip)		
Phone:					
Select all full week's child will b • Week 1 • Week 2 • Week 3 • Week 4 • Week 5 • Week 6 • Week 7 • Week 8 • Week 9	be attending:	dates for ex trips, etc:	xtended day m	hild will be attending, orning/afternoon, field	

Please attach a copy of the first page of the most recent federal tax return or bank statements from the past three months.

I certify (promise) under penalty of perjury that the foregoing is true and correct. That all information on this application is true and the annual income level of my household falls within the stated guidelines. I understand that the Upton Scholarship Committee may request supporting documentation. I am aware that if I purposely give false information, this application could be rejected, and I may be prosecuted under applicable State and Federal laws.

Signature:	Date:
Full Legal Name:	

Last Updated: January 2024