

## **Scholarship Application 2023-2024**

Please return to Aim High Academy

**Attn: Aim High Trustees** 

Mail: 7020 E 38th St Tulsa, OK 74137 Deliver: Front Desk at either location

(Check One) \_\_\_\_First time applicant

\_\_\_Scholarship Renewal

Aim High Academy combines FITNESS and FAITH to help build bright FUTURES in all children, regardless of economic means. Scholarships are available for students based on financial need. Although scholarship applications are accepted on an ongoing basis, they must be turned in by the 15th of each month to be eligible for evaluation for the upcoming month.

Only one Scholarship Application is needed per household. <u>All participants (including scholarship applicants)</u> must pay the registration fee at time of enrollment (\$30 for the first child and \$10 for each additional child). Scholarships applications are evaluated and families are notified of their status within 14 days of submission.

Please complete and submit all items included in the Scholarship Application Packet. <u>Incomplete scholarship</u> <u>application packets will be returned without consideration for a scholarship. Incomplete application packets must be resubmitted for consideration.</u>

## **Scholarship Application Packet must include:**

- **1.** A completed Scholarship Application. All lines must be filled in. If an item does not apply, please write "NA" on the line. Failure to do so will result in an incomplete application and will be returned to you.
- 2. **Income Verification.** Copy of two (2) pay stubs **OR** Copy of last year's tax return (form 1040 or W-2) **OR** letter from your employer verifying your current salary **OR** Copy of Social Security/Disability checks/ award letters. Failure to provide this information will result in an incomplete application and will be returned to you. **NOTE:** <u>Information in this section will be kept confidential.</u>
- 3. **Letter.** A letter stating your reasons for needing an Aim High Academy need-based scholarship (addressed as: "Dear Aim High Academy"). **It must be detailed and descriptive.**

## Once chosen, the Parents/Guardians and students must agree to the following:

- **a.** If a student misses 3 consecutive classes, he/she forfeits scholarship.
- b. Parents/Guardians must be active participants at Aim High Academy. Activities may include:
  - 1. Volunteer to help with administrative tasks, assisting instructors or cleaning during your child's class
  - 2. Be a spokesperson for Aim High Academy at public events, booths and meetings
  - 3. Clean the gym once a month (sanitize all mats)
  - 4. Participation in Aim High Academy fundraising activities or events
  - 5. Volunteer to help with building maintenance when needed (painting, lighting, etc.)
- c. Parents/Guardians & students each must write a thank you letter to our scholarship funders within 2 months of scholarship notification. Students ages 3 to 7 should draw a picture in lieu of writing a letter.

Please indicate your volunteer activity preferences.	We will make every	effort to assign y	ou to at leas	st one of
your preferred activities.				

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described above may result in loss of current and future scholarship awards.					
(Circle one)	Scholarship Type:	Tuition	/	Camp or Special Event	
Family Inform	ation				
Child's Name:		Bii	rth Date:_	Class:	
Child's Name:		Bii	rth Date:_	Class:	
Child's Name:		Bii	rth Date:_	Class:	
Child's Name:		Bii	rth Date:_	Class:	
Mother's Nan	ne (or Female Guardia	an):			
Street Address	S:				
City:	Stat	e: Zip C	ode:	Cell #:	
Email:		Relati	ion to chil	dren:	
Occupation: _		Employer: _			
Salary \$	Per	Week / Per M	onth / Pe	r Year (Circle one)	
	e (or Male Guardian): s:				
				Cell #:	
				dren:	
Occupation: _		Employer: _			
Salary \$	Per	Week / Per M	onth / Pe	r Year (Circle one)	
Annual House	hold Income: \$			_	

NOTE: A record of Parents/Guardians participation will be maintained. Failure to participate in activities

Please list all other income sources (rental inco	me, child support,	, Social Security, etc) below:	
Other Income \$Per Week/Mon	th/Year (Circle one	e) Source:	
Other Income \$Per Week/Mon	th/Year (Circle one	e) Source:	
Other Income \$Per Week/Mon	th/Year (Circle one	e) Source:	
Are you currently receiving public assistance? _	YESN	o	
Please indicate what type of assistance you rec	eive:		
Are you receiving free or reduced lunch?YE	ESNO	For how many years?	
Number of people living in your household, inc	luding the student	t(s):	
Are you or your spouse/partner a Student?	YESNO	Full or Part-Time?	-
Name of school:		#of hours per week:	
I have included all of the following in my Scho	larship Packet.		
A COMPLETED Scholarship Application			
Income Verification			
Letter			
I understand that I am completing an application application will be reviewed, and I will be conta application, I am stating my desire to receive a <b>High Academy can reject my application without</b> application is accurate to the best of my knowledge.	acted regarding my scholarship throug out explanation. I	y family's scholarship award. By gh Aim High Academy. <b>I undersi</b>	signing this tand that Aim
If my financial circumstances change during thi committee at Aim High Academy.	s scholarship awar	rd, I agree to inform the scholar	ship
Parent/Guardian Signature:		Date:	

THIS SECTION TO BE COMPLETED BY	AIM HIGH ACADEMY			
Date Original Application was receiv	ed: Was	Packet and Informa	ation complete?YESNO	
Date Application Packet was returned	ed (if applicable):	Reason Pack	ket was returned:	
		Date Return	ed Packet was resubmitted:	
Coach Comments:				
If this scholarship is a renewal	, did applicant serve a	all previously req	uired volunteer hours?YE	sno
If not, how many volur	iteer hours were serve	ed?		
If this scholarship is a renewal	, does applicant have	an account bala	nce?YESNO	
If so, what is the amou	nt of the current bala	nce?		
THIS SECTION TO BE COMPLETED BY	AIM HIGH ACADEMY			
SCHOLARSHIP AWARDS				
Athlete's Name:			Age:	
Assigned Class:	Class D	Jay:	Time:	
Scholarship award level	_ Amount Awarde	ed/Per Month: \$		
Total Annual Award:	Date Awa	ard notification se	ent to Parent/Guardian:	
Method of notification (email,	phone, letter, etc.):			
Athlete's Name:			Age:	
Assigned Class:	Class D	ay:	Time:	
Scholarship award level	Amount Award	ad/Dar Month: ¢		

Total Annual Award:	Date Award notification sent to Parent/Guardian:
Method of notification (email, phone, lette	r, etc.):