

Kevin Roche Memorial Assistance Fund

Kevin Roche was a member of the Inver Grove Heights Hockey Association. He was a life long hockey fan and enjoyed watching youth hockey. This fund was established in Kevin's memory to help kids and families with the costs of playing in the Inver Grove Heights Hockey Association. Funds for the scholarships were initially made possible through donations from Kevin's friends and family. The intent is for the fund to eventually continue through fundraising efforts by the IGHHA.

If you have any questions, please contact Wendy Roche at 651-485-3684 or rochekw2@comcast.net

Guidelines:

1. Applicants must be playing for IGHHA for the 2018-2019 season.
2. Scholarships are granted on a per season basis. Applicants must reapply each season.
3. Applicants can receive scholarships for only two years. The goal of the scholarship is to help families get through periods of financial difficulty, and is not intended to be an annual subsidy.

•The Kevin Roche Memorial Assistance Fund can only award grants for level fees. It does not award grants for registration, volunteer, or fundraising fees.

*For the 2018-2019 season the fund will be able to grant a maximum of 50% of each level fee.

The following chart explains the maximum amount that can be funded at each level.

Level	Level Fees for 2018-2019 Season	Maximum Amount that can be granted by Kevin Roche Memorial Assistance Fund
Mini-Mite (first year) IGH kids only	\$0.00	\$0.00
Mite	\$260.00	\$130.00
8U Girls	\$260.00	\$130.00
Squirt	\$870.00	\$435.00
10U Girls	\$870.00	\$435.00
PeeWee	\$1090.00	\$545.00
12U Girls	\$1090.00	\$545.00
Bantam	\$1140.00	\$570.00

4. Applicants should be in good standing with the IGHHA and exhibit general financial need.

5. Application Process:

- a. Applicants must submit a scholarship application to Wendy Roche by mail or email.
Wendy Roche
Kevin Roche Memorial Scholarship
7123 Corliss Way
Inver Grove Heights, MN 55076

or

rochekw2@comcast.net

- b. The scholarship committee will review the applications and determine the number and dollar amount of scholarships based on number of applicants, eligibility, and funds available. Preference will be given to families that receive public assistance such as school lunch subsidies, medical assistance, or unemployment insurance. Copies of the most recent tax statement filed may be requested by the committee.

- c. Applicant's names and all information provided will be kept strictly confidential. Only the scholarship committee will review the applications.

- d. All decisions of the scholarship committee are final.

- e. All applicants will be informed of the committee's decisions by email or phone.

Kevin Roche Memorial Assistance Fund Application

List all IGHHA hockey players in the family and level of play for 2018-2019.

Player's Name	Level of Play	Years Played
---------------	---------------	--------------

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Mother/Guardian Name _____

Phone (H) _____

(C) _____

email _____

Address _____

Father/Guardian Name _____

Phone (H) _____

(C) _____

email _____

Address _____

Household Income (Gross) _____

Does your family receive public assistance? Examples: school lunch subsidies,
medical assistance, unemployment _____yes _____no

Please list assistance your family receives. _____

Grant amount requested _____

