

# La Grange Park Little League Inc.



#### CHRIS ELLIS SCHOLARSHIP APPLICATION

To keep the LaGrange Park Little League's long standing precedent of not turning away any player for lack of ability to pay, the LaGrange Park Little League (LGPLL) will now offer a formal Scholarship Policy for all levels of its organization based on a demonstrated need for assistance.

The La Grange Park Little League (LGPLL) Financial Aid Committee reviews and approves all applications received during the registration process. All application information is kept 100% confidential.

If your application is not approved, please consider an Installment Payment Plan which is also offered.

The LGPLL shall have sole discretion on the awarding of Financial Aid. All applicants will be notified, as soon as their application has been reviewed by the Financial Aid Committee.

### REQUIREMENTS FOR ELIGIBILITY

- 1. Commitment to attend a minimum of 80% of scheduled practices and games.
- Application must be completed by a parent, guardian, or head of household, with all requested information provided. Incomplete applications will not be considered. Applications can be found on the LGPLL website.
- 3. Applicant must submit proof of residency.
- 4. All applications are due prior to the closing date of registration.

# FINANCIAL AID PRIORITY WILL BE GIVEN TO ELIGIBLE CHILDREN MEETING ONE OR MORE OF THE CRITERIA BELOW:

- 1. Member of a multi-child family and/or living in a single parent home receiving assistance from programs such as: Food Stamps, Medicaid, SSI, Foster Care, WIC, etc. (*Must provide written documentation of participation in these programs to receive priority status*)
- 2. Written recommendation by school representatives, social workers, youth community center workers, or other social services representatives. (*Must provide to receive priority status*)
- 3. Special consideration will be given to those applicants that indicate that they are willing to serve as a volunteer on their application.

OFFICE/COMMITTEE USE ONLY	
Date Application Received By Committee:	Registration End Date:
LGPLL Financial Aid Committee Approval: \$_	



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Please complete the following information, one application per child:  YEAR
Athlete's Name:
LGPLL Level: T-Ball / Coach Pitch / Rookies / Minors / Majors
Age: Birth date:
Address: Street City State Zip:
School Athlete Attends: Grade
Type of scholarship requested: Full Partial Amount Requested: \$
Would you be willing to serve as a Volunteer: () Head Coach () Asst. Coach () Team Parent
( ) Work Concession Stand 3x
PARENT / GUARDIAN INFORMATION: Total Household Annual Income: \$
Father/Guardian Name:
Home Phone: Work Phone:
E- mail:
Mother's Name:
Home Phone: Work Phone:
E- mail:
CONSENT TO RELEASE INFORMATION I understand that my signature authorizes the La Grange Park Little League to obtain verification of all information on this application and that additional information may be necessary for approval of this application. I certify that all of the information on this form is true and correct and that I will comply with each of the "Requirements for Eligibility" items listed in the Application Information.
Parent/Guardian Signature and Date  OFFICE/COMMITTEE USE ONLY  Date Application Received By Committee: Registration End Date:  LGPLL Financial Aid Committee Approval: \$