



Owatonna Activities Department
 Marc Achterkirch, Activities Director
machterkirch@isd761.org (507)-444-8989
 Nancy Benson, Activities Secretary
nbenson@isd761.org (507)-444-8988
 Fax: (507)-686-6119



Activities Scholarship Request

Student Information

First Name: _____ Last Name: _____ Date: _____

Grade: _____ Age: _____

Name of Parent/Guardian: _____ Phone #: _____

Address of Parent/Guardian: _____ Email address: _____

Sport or Activity Signing up for: _____

1. For a scholarship application to be considered, a Free & Reduced Lunch Application for the current year must be completed and returned with this request OR proof of completion provided. If proof of application/eligibility is not provided, your signature gives us permission to obtain your free/reduced status with the Owatonna Public School food service department.

2. Hardship conditions/ complete waiver: Please complete the following.

Please describe the nature of the hardship: (Health conditions, Natural disaster, financial, etc.)

I hereby certify that all the information furnished above is true and accurate to the best of my knowledge.

Signature of Parent: _____ Date: _____

Office Use Only

Approved: _____ Denied: _____

Authorized administrator: _____ Date: _____

*This form is to be completed and authorized no less than one week prior to the first competition.

*The information you provide on this application is confidential and will be used strictly for determining student eligibility for extension/waiver of fees.