

AGG Scholarship Application Form

Dear Applicant:

Thank you for your interest in the American Gold Gymnastics Scholarship Program. Established in 1983, our scholarship program has allowed hundreds of children who couldn't otherwise do so, participate in American Gold Gymnastics' nationally acclaimed programming.

Please be advised, if your application is incomplete—even one missing section—your application will be returned without a decision. Scholarship decisions will be made on a quarterly basis. You will hear from the committee once your scholarship application has been considered. Once completed either drop your application off at the front desk at American Gold Gymnastics during business hours or scan and email to scholarships@americangoldgymnastics.com. Thank you for your attention to detail, as well as your understanding.

Sincerely,

American Gold Gymnastics
Scholarship Committee

Application Questions:

Please circle which quarter you are submitting the application for. Please note: applications received after noon on the deadlines below will be considered for the next quarter:

December 1st March 1st May 15th Rec/June 1st Team September 1st

Name: _____

Email Address: _____

Address: _____

Preferred Phone: _____

Please complete the following questions only for the child(ren) you are requesting a scholarship for:

First Child's Name & Age: _____

Second Child's Name & Age: _____

Third Child's Name & Age: _____

Please list the program and class(es) you are applying for (include level, day and time preferred):

Enter the percentage range for which you are applying. Please note, we currently do not offer 100% scholarships. _____

Have you ever received a scholarship from American Gold Gymnastics? Yes or No? _____

If you have received a scholarship from American Gold Gymnastics, please note the date(s) received.

Parent or guardian narrative (Please include a written statement explaining (1) the financial circumstances that have led you to requesting this Scholarship, (2) your commitment to your child, and (3) your commitment to American Gold Gymnastics.):

Athlete Narrative (In an age appropriate format, please include the student's narrative about his/her commitment to the activity and what it means to him/her):

Team Scholarship Applicants, please list below what AGG meets or events you have volunteered at this calendar year.

Are you a current recipient of any of the following benefit programs? Please circle all that apply:

TANF – Temporary Assistance for Needy Families

CCAP – Child Care Assistance Program

SNAP – Supplemental Nutrition Assistance Program

BCAP – Basic Care Assistance Program

Additional Income? Are you receiving child support or any or any other sources of income? If yes, please indicate the dollar amount and explain:

I understand that applications are reviewed on a quarterly basis so it could be up to 3 months until I hear about my application status.

Initial: _____ Date: _____

Please read the following and sign the bottom of the application that you understand, and that all information included in the application is correct -

I understand that Scholarships are awarded for a defined period of time, typically 6 months or less. I understand that after my scholarship expires, I am welcome to reapply, I understand that all scholarships are partial (no 100% scholarships are offered), I understand that the availability and therefore the size (%) of scholarships may vary year to year., I understand that the availability and therefore the size (%) of scholarships may vary between programs., I understand that in addition to financial need, other factors are

also considered when known: (1) the student's engagement in class and dedication to the activity, (2) the student's attendance, and (3) parental support of American Gold Gymnastics, its methods, and goals., I understand that scholarships are awarded for class fees only. Extraneous costs, if any, are not included. Examples of extraneous costs may include apparel, equipment, competition fees, travel fees, membership fees, etc., I understand that scholarships are not transferrable between students., I understand that it is my responsibility to promptly inform the Scholarship Committee of favorable changes in my financial circumstances., I understand my scholarship may be rescinded at any time for any reason including, but not limited to, account delinquency, changes in circumstances, poor attendance, or lack of parental support., I understand that I am to keep all aspects of any scholarship I receive 100% confidential and that if I breach this agreement my scholarship may be rescinded., I understand that any scholarship offer I receive applies to FUTURE tuition periods only. Previous tuition periods must be paid in full at the regular rate., I understand that a scholarship negates promotional discounts, employee discounts, and all other discounts., I understand that scholarship decisions may take up to 6 weeks., I understand that incomplete applications will be returned to me for completion in which case the 6 week cycle begins anew.

Signature: _____ Date: _____