NAPLS Financial Scholarship Program

Athletics and Extracurricular Activities

The New Albany-Plain Local School District requires a fee for student participation in interscholastic sports and extracurricular activities. The fee for high school athletics is $425 per season. The fee for middle school athletics is $225 per season. The fee for middle or high school extracurricular activities is $125 per activity.

We are grateful that generous members of our community have joined with the district and the New Albany Community Foundation to create a scholarship program to support families with financial need. We recognize that the participation fees may constitute a financial burden for students and their families and that students may need scholarships to help offset some or all of the costs of these experiences.

The Scholarship FUND, managed by the New Albany Community Foundation, provides financial support to students with a demonstrated financial need and/or hardship who would not otherwise be able to participate in athletics or extracurricular activities sanctioned by the New Albany-Plain Local Schools. The school district is responsible for assessing all scholarship applications and awarding financial assistance in a manner that equally considers athletics and extracurricular activities. Assistance will be awarded to students who meet eligibility requirements for participation. The names of the students awarded assistance will be kept confidential.

Any middle or high school student enrolled in the New Albany-Plain Local Schools may request a financial scholarship. If awarded, the scholarship amount will be based on student need, availability of scholarship funds and the number of students qualifying for the scholarship. Scholarships will range from 10% to 100% of the pay-to-participate fee based on family income and/or demonstrated hardship. (Participants are encouraged to also pursue other avenues of fundraising to support program expenses.)

To be eligible for the scholarship, applicants must provide ONE of the following:

1. Verification of the student’s enrollment in the Free or Reduced Lunch Program for the 2018-19 school year OR
2. Submission of the NAPLS Financial Scholarship Program application including verification of income by providing a copy of the prior year’s tax return and current month’s pay stub(s).

Note: Applications that do not include the required verification of income will not be considered. Additional information regarding a hardship may be included that explains circumstances that prevent the student from being able to participate despite the income requirements outlined in the application.

All applications for the NAPLS Financial Scholarship Program must be emailed or mailed to:

Michael Sawyers, Superintendent
sawyers.1@napls.us OR
New Albany-Plain Local Schools
Superintendent’s Office
55 N. High Street
New Albany, OH  43054

Please write “CONFIDENTIAL” on the envelope if mailing

Applicant

Student Name _____________________________________________________________________

Current Grade ________  Sport or Extracurricular Activity: ________________________________

(If multiple students in a family are in the same season, add the name of the student(s) below. If more space is needed, add on back of this form).

Student Name _____________________________________________________________________

Current Grade ________  Sport or Extracurricular Activity: ________________________________

Parent/Guardian Contact Information

Please Print

Name ______________________________________________________________________________

Address ______________________________________________________________________________

City______________________________  State ____________  Zip Code___________________________

Home Phone (_____) ______________________ Mobile Phone (_____) _________________________

Email Address _________________________________________________________________________

Confidentiality and Statement of Intent:
All information submitted to NAPLS on this application and as part of this application process, including correspondence, will be kept completely confidential. Only members of the NAPLS Financial Scholarship Program Committee will have access to this information.

We declare that the information reported on this form, to the best of our knowledge and belief, is true, correct and complete. We recognize that intentionally providing false or inaccurate data or information may impact our ability to receive a scholarship.

Print name(s) and provide signatures of parents/guardians listed above.

Name(s) (please print) __________________________________________________________________

Signature(s)__________________________________    _________________________________ Date____________

Return this Financial Scholarship Program Application with verification of income to:
Michael Sawyers, Superintendent
sawyers.1@napls.us  OR
New Albany-Plain Local Schools  
Superintendent’s Office  
55 N. High Street, New Albany, OH 43054  
Please write “CONFIDENTIAL” on the envelope

Part 1.  ALL HOUSEHOLD MEMBERS
Names of all household members (First, Middle Initial, Last)  
Name of school and a school grade level for each child/or indicate “NA” if child is not in school  
Check if a foster child (legal responsibility of welfare agency or court)  
Check if no income
*If all children listed below are foster children, skip to Part 5 sign this form.

<table>
<thead>
<tr>
<th>Name</th>
<th>School</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

Part 2.  BENEFITS:  If any member of your household receives Supplemental Nutrition Assistance Program (SNAP, formally Food Stamps) or Ohio Works First (OWF) benefits, provide the name and 10-digit case number for the person who receives benefits and skip to Part 5. If no one receives these benefits, skip to Part 3.

NAME ________________________________  10 Digit Case Number ________________________________

Part 3.  TOTAL HOUSEHOLD GROSS INCOME (before deductions).  List all income on the same line as the person who receives it.  Check the box for how often it is received.  Record each income only once.

<table>
<thead>
<tr>
<th>Name (List all household members with income)</th>
<th>Earnings from work before deductions</th>
<th>Weekly</th>
<th>Every 2 Weeks</th>
<th>Twice Monthly</th>
<th>Monthly</th>
</tr>
</thead>
<tbody>
<tr>
<td>(example) Jane Smith</td>
<td>$200</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$150</td>
<td>X</td>
<td>$0</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$50/quarterly</td>
</tr>
</tbody>
</table>

Part 4.  SCHOOL INSTRUCTIONAL FEE WAIVER  Does your child(ren) qualify for a waiver of school instructional fees?
☐ Yes, instructional fee waiver received.  ☐ No, instructional fee waiver not received.

Part 5.  OPTIONAL: Hardship circumstance
In special circumstances, support may be needed for families beyond the need demonstrated by family income.  If a particular hardship exists that requires financial assistance, the following space may be used to explain in detail so that the current situation may be fully understood and considered.  (Additional pages may be attached as needed.)

________________________________________________________________________
________________________________________________________________________

Part 6.  PARENT/GUARDIAN SIGNATURE
An adult household member serving as the designated parent/guardian must sign this application.
Family Income Scale – Sliding scale

<table>
<thead>
<tr>
<th>Household Size</th>
<th>Federal Assistance</th>
<th>160%</th>
<th>220%</th>
<th>280%</th>
<th>340%</th>
<th>400%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$11,670</td>
<td>$18,672</td>
<td>$25,674</td>
<td>$32,676</td>
<td>$39,678</td>
<td>$46,680</td>
</tr>
<tr>
<td>2</td>
<td>$15,730</td>
<td>$25,168</td>
<td>$34,606</td>
<td>$44,044</td>
<td>$53,482</td>
<td>$62,920</td>
</tr>
<tr>
<td>3</td>
<td>$19,790</td>
<td>$31,664</td>
<td>$43,538</td>
<td>$55,412</td>
<td>$67,286</td>
<td>$79,160</td>
</tr>
<tr>
<td>4</td>
<td>$23,850</td>
<td>$38,160</td>
<td>$52,470</td>
<td>$66,780</td>
<td>$81,090</td>
<td>$95,400</td>
</tr>
<tr>
<td>5</td>
<td>$27,910</td>
<td>$44,656</td>
<td>$61,402</td>
<td>$78,148</td>
<td>$94,894</td>
<td>$111,640</td>
</tr>
<tr>
<td>6</td>
<td>$31,970</td>
<td>$51,152</td>
<td>$70,334</td>
<td>$89,516</td>
<td>$108,698</td>
<td>$115,092</td>
</tr>
<tr>
<td>7</td>
<td>$36,030</td>
<td>$57,648</td>
<td>$79,266</td>
<td>$100,884</td>
<td>$122,502</td>
<td>$144,120</td>
</tr>
<tr>
<td>8</td>
<td>$40,090</td>
<td>$64,144</td>
<td>$88,198</td>
<td>$112,252</td>
<td>$136,306</td>
<td>$160,360</td>
</tr>
<tr>
<td>Scholarship range*</td>
<td>100%</td>
<td>90-80%</td>
<td>79-60%</td>
<td>59-40%</td>
<td>39-20%</td>
<td>19-10%</td>
</tr>
</tbody>
</table>

*Overall, the ranges listed are a guide. Awards may vary based on available dollars and unique circumstances. Most significant needs will be funded first. Award levels are at the discretion of the award committee.