



Football Scholarship Application

(Confidential)

Application, supporting documents & fee due by April 1, 2020.

Player Name: _____
Last First Middle

Date of Birth: _____ Age: _____

School: _____ Grade: _____

Address: _____

City: _____ Zip: _____

Telephone: (____) _____

Parent /Guardian Name: _____

Parent /Guardian Name: _____

Address (if different than player): _____

Parent / Guardian Email: _____

Scholarship Eligibility

Does the player's family qualify for (check all that apply):

- Free or Reduced Lunch through Carlsbad Unified School District
- CalFresh, EBT, SNAP Food Assistance Program

I, the undersigned, certify that all of the information provided on this application is accurate and correct. I understand that this information is being given for the receipt of financial assistance, and that CPW officials may verify the information on the application. Should I provide false information, CPW has the right to withdraw any financial support and suspend player participation. Application submission is not a guarantee of scholarship money; scholarship recipients will be notified via email.

Parent / Legal Guardian (Print Clearly): _____

Signature: _____

Date: _____

****All information provided to CPW will be held in strict confidence****

Carlsbad Pop Warner Football Scholarship Application (cont.)

Required Documents & Fee

The following three items are also required with this application:

- Payment of a non-refundable \$50 fee. This fee shall be applied toward any registration fees not covered by the awarded funds. Please make check payable to "Carlsbad Pop Warner".
- Proof of Carlsbad Residency - Copy of current SDG&E utility bill, both top & bottom portions of the bill
- Proof of Need (at least one of the items below)
 - Award letter for EBT / Calfresh / SNAP eligibility
 - Proof of Free or Reduced Lunch eligibility from Carlsbad Unified

This application will not be accepted without all the required information.

Deadline: April 1, 2020.

Mail application, supporting documentation, and \$50 fee to:

**Carlsbad Pop Warner
P.O. Box 297
Carlsbad, CA 92018**

Scholarship recipients will be notified via email by April 15, 2020.

Board Disposition (For CPW Use Only)

Approved: Yes [] No []

Approval Level / Amount: \$ _____

Reason for Disapproval: _____

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