



Redondo Beach Youth Basketball Scholarship Application Request

Please answer all questions honestly and truthfully and to the best of your knowledge. All information contained in this application will remain completely confidential. You will be asked to write a brief explanation on the back of this form as to why you feel you should be granted scholarship consideration. All requests are subject to RBYB Board Approval. The Board of Directors reserves the right to refuse your request or alter the amount of your scholarship request.

RBYB PLAYER(S) FOR WHICH YOU ARE REQUESTING SCHOLARSHIP ASSISTANCE:

	PLAYER NAME First, Last Name	GRADE	YEARS IN RBYB	SCHOLARSHIP TYPE (Circle one) Must Post \$75.00 Deposit w/ Application	AMOUNT YOU CAN PAY
1				PARTIAL / FULL	\$
2				PARTIAL / FULL	\$

PARENT/GUARDIAN APPLICANT INFORMATION:

Print Your Name	Your Mailing Address	City	Zip Code
Sign Your Name below:	Date of this Application:	Daytime Phone:	Evening Phone:

HOUSEHOLD DATA:

Marital Status: (check one) <input type="checkbox"/> Single Parent <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	Are You Presently Employed: <input type="checkbox"/> No <input type="checkbox"/> Yes, Full Time <input type="checkbox"/> Yes, Part Time	Source of Family Income: (check all) <input type="checkbox"/> SSA <input type="checkbox"/> Welfare <input type="checkbox"/> Work <input type="checkbox"/> Child Support <input type="checkbox"/> Other
Number of Persons in Household: Adults: Children:	Number of Wage Earners in Household:	Monthly Income All Sources: <input type="checkbox"/> \$0 - \$1000 <input type="checkbox"/> Up to \$2000 <input type="checkbox"/> Over \$2000

SCHOLARSHIP REQUIREMENTS:

1. Were you an RBYB scholarship recipient last year? Yes No
2. If you were a scholarship recipient last year? Did you work your volunteer hours? Yes No

If not, Please explain:

3. In order to be eligible for RBYB Scholarship consideration, you must be a resident of Redondo Beach or be a Redondo Beach City employee.

- Are you a currently a Resident of the City of Redondo Beach? Yes No
- Are you currently an employee of the City of Redondo Beach? Yes No
- Does your child currently attend a Redondo Public school? Yes No

4. All Scholarship Applicants must pay \$75.00 for Player uniform, Pictures, Trophy, and Insurance.

Are you able to pay this amount per child? Yes No

5. Are you able to post the \$35.00 Refundable Snack Bar Deposit Fee? Yes No

VOLUNTEER REQUIREMENTS:

You must work your Team's Snack Bar Assigned Shift Time. Are you able to do so? Yes No

If not, Please explain:

In addition to working your assigned shift in the Snack Bar, you will be required to volunteer a total of 8 additional hours during the current season. Failure to do so will be grounds for scholarship ineligibility in future seasons. Your volunteer time can be done 1-2 hours per week or over the course of 2 days on a Friday, Saturday, or Sunday. Are you able to do so? Yes No

If not, Please explain:

VOLUNTEER SIGN UP ACTIVITIES: (Total Hours must equal at least 8 Hours)

Extra Snack Bar Duty, indicate () Fri () Sat () Sun Time:	Sunday Night Gym Cleanup 4:00 p.m. to 5:30 p.m. Indicate Date(s)
Friday Night Gym Setup 4:00 p.m. to 5:30 p.m. Indicate Date(s)	Help on Picture Day, JAN 16, 2010 Indicate Time:

PLEASE JUSTIFY WHY THE RBYB BOARD SHOULD GRANT YOUR SCHOLARSHIP REQUEST:

RBYB BOARD USE:

BOD Recipient:	BOD Approval/Denial Date:	Scholarship Amount: \$	Applicant Notification Date:
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