

# The Kroc Center Scholarship Program Classes & Programs 2021



Friends and supporters of The Salvation Army Ray and Joan Kroc Corps Community Center have created a Scholarship Fund which helps low-income families and individuals to afford Kroc Center programs by providing a scholarship. Our goal is to aid people in having positive life-changing experiences through arts, athletics, personal development, spiritual discovery and community service.

**All Family Resource Center (FRC) services, including all scholarship requests, will be provided through supportive and strengths-based case management. All scholarship applicants may be asked to meet with an FRC associate before a scholarship can be awarded to verify eligibility.**

## CLASS/PROGRAM INFORMATION:

- Recipients must choose between a Membership or a class/program. Only one scholarship per person will be granted.
- Recipients will be asked to contribute towards program fees based on a sliding scale. Scholarship submissions and payments are made at the Family Resource Center Guest Service Desk only.
- Application does not guarantee assistance. Scholarship space and funding is limited and will be awarded based on eligibility, timelines, funding and space availability.
- There is a \$20.00 administrative fee for any changes made after scholarships have been processed.
- Deadlines are strictly enforced and nonnegotiable. Enrollment into Classes/Programs after a voucher has expired or a deadline has passed is not authorized.
- Recipients must use the Membership that has been funded. Future requests for scholarship assistance by the same applicant may not be considered if funds or programs are misused, not used, and/or at the discretion of the Case Manager assigned to you based on non-compliance. All scholarship awards are confidential.
- Applicants agree to refrain from discussing awards with others.

## ELIGIBILITY REQUIREMENTS & GUIDELINES:

**The following documents are required for all individuals residing in the "Household (including roommates and non-family members)A household is defined as all individuals residing within the home, including non-family members:**

- Address verification (a recent utility bill such as SDGE, water, or cable/internet, NO CELLPHONE BILLS) **SAN DIEGO COUNTY ONLY**
- Verification for all individuals in the household (one of the following for each individual)
  - o Photo ID required for all adults in the home (State ID, driver's license, passport, or military ID)
  - o Identification for all children in the home (birth certificate, Medi-Cal card, or immunization record)
  - o **We Do Not Accept Social Security Cards For Any Reason**
- Current proof of All income for ALL adults or lack of income for all individuals living in the household
  - o One months current pay stubs, TANF/Calworks Notice of Action, food stamps, Sec 8, family loan, pension, child support, Social Security or unemployment benefits statement, educational class schedule and/or financial aid verification, etc.)

## APPLICATIONS FOR CLASSES/PROGRAMS MUST BE SUBMITTED 4 WEEKS PRIOR TO THE CLASS/PROGRAM START DATE (THIS INCLUDES DAY CAMP).

Scholarship recipients will be asked to contribute towards the Class/program fees based on a sliding scale. Only group classes will be funded (no private classes including personal training and private ice skating lessons). Only one class or program per person at a time. Due to limited space and funding, not all class requests will be granted.

CLIENT LAST NAME:

CLIENT FIRST NAME :

TELEPHONE NUMBER:

BEST TIME TO CALL

AM

PM

EMAIL ADDRESS :

LAST DATE OF PREVIOUS SCHOLARSHIP OR SERVICES?

**You must have a current updated file to receive a scholarship.**

**GROUP CLASS OR PROGRAM REQUEST:**

**EXAMPLE**

CHILDS NAME: MARIA AGE 10 YEARS  
\_\_\_\_\_  
NAME OF CLASS OR PROGRAM REQUESTED: SWIM LESSONS  
\_\_\_\_\_  
DATES OF CLASS/SESSION MARCH 25-MAY13 DAY/TIME REQUESTED: TUESDAY 5:30PM  
\_\_\_\_\_

CHILDS NAME: AGE  
\_\_\_\_\_  
NAME OF CLASS OR PROGRAM REQUESTED  
\_\_\_\_\_  
DATES OF CLASS/SESSION DAY/TIME REQUESTED:  
\_\_\_\_\_

CHILDS NAME: AGE  
\_\_\_\_\_  
NAME OF CLASS OR PROGRAM REQUESTED  
\_\_\_\_\_  
DATES OF CLASS/SESSION DAY/TIME REQUESTED:  
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DATES OF CLASS/SESSION DAY/TIME REQUESTED:  
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CHILDS NAME: AGE  
\_\_\_\_\_  
NAME OF CLASS OR PROGRAM REQUESTED  
\_\_\_\_\_  
DATES OF CLASS/SESSION DAY/TIME REQUESTED:  
\_\_\_\_\_

**PIANO STUDENTS: Must have approval from Music Department before enrolling in higher level classes.**

**ICE HOCKEY PLAYERS: Must have approval from Ice Department before enrolling in higher level classes**

PARTICIPANTS NAME: CLASS & LEVEL  
\_\_\_\_\_  
APPROVED BY DATE  
\_\_\_\_\_

**By signing below I certify that I have read and understand the scholarship program guidelines. Recipients must use the Membership or Class/program funded. Future requests for scholarship assistance by the same applicant may not be considered if funds or programs are misused.**

SIGNATURE: DATE  
\_\_\_\_\_