

Catholic Youth Organization Participant Scholarship Application

The following is the official application for a CYO participant scholarship. This program is designed to help defray the cost of CYO Sports registration and fees for those in need, so that every child has the opportunity to participate. In order to qualify for a scholarship, the following must be submitted to the CYO Office by the appropriate deadline:

1. A completed “Participant Scholarship Application” Form with both Participant and Parent/Guardian Signatures
2. A completed Scholarship Recommendation Form (separate) signed by your parish Athletic Director

A Parent/Guardian must complete both forms and obtain the appropriate signatures in order to be considered. For families with multiple children, you must submit a separate application for each child, with only one Scholarship Recommendation form required per family – these must be submitted together. Priority for scholarships will be given on a need-----basis throughout each year. Families applying for multiple children or sports may be awarded only partial funding based on need and available scholarships.

In addition, **each student participant must commit to attending at least 80% of all practices and games** should he or she be awarded a scholarship.

Parent/Guardian must commit to attendance at the mandatory CYO Parent Like a Champion™ meeting prior to the child’s first season. Failure to do either may result in collection of fees or will affect future applications.

The following are deadlines for consideration of applications by sport. You may fill out only one application for the entire year. For children participating in multiple sports, please submit prior to the deadline for the first sport your child will participate in. *Application deadlines will be provided to DSMs. Please contact your DSM for the application deadlines for particular seasons.*

Successful applicants will be notified through their parish Athletic Director after all applications have been reviewed. Please contact the CYO Office with any questions at admin@cyojwa.org or by calling (913) 915-0139.

**Catholic Youth Organization
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Contact Information

Participant Name: _____

Birth Date: _____ Male/Female: _____ Grade (School Year): _____

Parent/Guardian Name: _____

Home Phone: _____ Cell Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Athlete lives with (circle): Both Parents / Mother / Father / Other: _____

Participant School: _____

Participant Parish (if different from School): _____

Scholarship Information

**The CYO Scholarship Program is a need---based program created to help participants for whom registration and sports fees are a hardship. As such, the following information will be used solely for the purpose of assessing need and will be kept confidential by the CYO Office. It will not be shared with outside parish personnel or other parties.*

Please select the sport(s) for which you are applying for a scholarship:

- ☐ Cross Country (Fall)
- ☐ Football (Fall)
- ☐ Volleyball (Fall)
- ☐ Basketball (Winter)
- ☐ Track & Field (Spring)

Amount of Scholarship Requested:

- ☐ Full Scholarship
- ☐ Partial Scholarship (Please Provide Amount Requested): \$ _____

Number of Dependent Children in Household: _____

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Total Gross Household Income Annually: \$ _____

Has this child ever received a scholarship from the CYO before? Yes No

In the space below, please include a brief essay on why your child should be awarded a CYO Participation Scholarship for the upcoming season (should be no longer than 150 words):

Signature and Declaration

By signing below, I certify that all the information listed in this application is true and correct. I understand that my signature affirms my commitment to all requirements of this application; that the Participant listed will attend 80% of all practices and games and that the Parent/Guardian will attend the Parent Like a Champion meeting.

Signature of Participant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

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This form must be signed by the Athletic Director for the parish at which the participant applying is registering to play. This form must be submitted by the Parent/Guardian along with the Participant Scholarship Application (separate).

Athletic Director Recommendation

Participant/Applicant Name(s): _____

Athletic Director Name: _____

Parish: _____

By signing this form, I certify that I am the representative in charge of CYO athletics at the designated parish listed above. I also attest that, to the best of my knowledge, the participant and family applying for the CYO Participant Scholarship program have demonstrated a need for this scholarship in order to have their child(ren) participate in CYO athletics. Though I understand that not all applications will be approved based on funding allotments, by signing below I recommend that the CYO accept the participant's application.

Athletic Director Signature: _____

Date: _____