

City of Tempe Community Services
2024 Youth Scholarship Request Form (January 1 – December 31)



Parent/Guardian First and Last Name: _____
 Date of Birth: _____ Gender: _____
 Street Address: _____
 City/State/Zip: _____
 E-Mail: _____
 Cell Phone: _____ Home Phone: _____

Requested youth members of household 17 years of age or younger to be included in scholarship:

First and Last Name	Date of Birth	Gender	School

- Scholarships available to youth 0-17 years old who are Tempe or Guadalupe residents **OR** enrolled in a Tempe school.
- The percentage reduction amount given for scholarships is applied per eligible program or activity.
- Fee paid is a minimum of \$10.00 or the percentage reduced price, whichever is greater.
- Granted scholarship is valid for one calendar year and eligible for Community Services Activities & Programs ONLY.
- Submit form and supporting documents via e-mail to pkrec@tempe.gov or in person at any of the following facilities during business hours:
 - Edna Vihel Arts Center, 3340 S Rural Rd
 - Escalante Multi-Gen Center, 2150 E Orange St
 - Kiwanis Recreation Center, 6111 S All-America Way
 - Pyle Adult Recreation Center, 655 E Southern Ave
 - North Tempe Multi-Gen Center, 1555 N Bridalwreath St

To allow a maximum number of participants to receive scholarships, we ask that each family contribute as much toward the activity fee as financially feasible.

Please identify the percentage reduction that would best serve your current need: 25% 50% 75%

To properly review, the following two sets of documentation is required to be submitted along with the form:

1. **Proof of enrollment in a subsidy program**, such as: Free/Reduced Lunch Program, AZ WIC, TANF, etc.
-AND-
2. One of the following:
 - **Proof of child’s enrollment in a Tempe school**, such as: school ID, grade card, progress report, etc., **OR**
 - **Picture ID of parent/guardian AND proof of Tempe residency**, such as: utility/phone bill or rental agreement from within last 30 days, etc.

STAFF USE ONLY			
Completed by: _____	Date: _____	Fee Reduction %: _____	
Subsidy Document Provided: _____			
Type of Tempe School/Residency Doc Provided: _____		Type of ID: _____	