

## **Football Scholarship Application**

(Confidential)

## Application, supporting documents & fee due by April 1st.

Player Name:		
Last	First	Middle
Date of Birth:	Age:	
School:		Grade:
Address:		·····
City:		
Telephone:()		
Parent /Guardian Name:		
Parent /Guardian Name:		
Address (if different than player):		
Parent / Guardian Email:		· · · · · · · · · · · · · · · · · · ·
Scholarship Eligibility		
Does the player's family qualify f	or (check all that ap	ply):
☐ Free or Reduced L	unch through Carlsb	oad Unified School District
☐ Calfresh, EBT, SNA	AP Food Assistance	Program
Any extenuating circumstances?		<del>-</del>
understand that this information is bein officials may verify the information on the	g given for the receipt on the application. Should I and suspend player part	provide false information, CPW has the ticipation. Application submission is not a
Parent / Legal Guardian (Print Cl	learly):	
Signature:		
Date:		

<sup>\*\*</sup>All information provided to CPW will be held in strict confidence\*\*

## Carlsbad Pop Warner Football Scholarship Application (cont.)

## **Required Documents & Fee**

The fo	ollowing 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 pay via Venmo to		
	@Carlsbad-PopWarner.		
	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.		
Dead	line: April 1st of current year.		
	I application and supporting documentation to dent@carlsbadpopwarner.com		
	650 application fee can be sent via Venmo to @Carlsbad-PopWarner. Please de the player's name and "Scholarship application" in the notes.		
Scho	larship recipients will be notified via email by April 15th.		
*****	***************************************		
Board	Disposition (For CPW Use Only)		
Approv	ved: Yes [ ] No [ ]		
Approv	val Level / Amount: \$		
Reaso	n for Disapproval:		

<sup>\*\*</sup>All information provided to CPW will be held in strict confidence\*\*