



# H.O.P.E RHYTHMIC GYMNASTICS

## SCHOLARSHIP APPLICATION

Parents interested in applying should speak to H.O.P.E. Scholarship Manager, Renata L. C. De Freitas. Scholarships awards are based on different types of need. Examples of need might include changes in employment, financial status, unexpected medical expenses, or multiple tuitions. The process is done in strict confidence: applications are only shared with the H.O.P.E. President and H.O.P.E. Scholarship Manager.

In order for an application to be considered, the following guidelines must be followed:

1. Applications that are missing any of the required documents stated on the Application Requirements Section will not be reviewed. **Applications that are incomplete should not be submitted.** All documents must be submitted in the beginning of the school year or when joining the program. Each session the Scholarship Manager will contact the families that have been awarded scholarship to verify if the situation is still the same. If any changes occurred updated documents need to be submitted and evaluated.

Note: There is no guarantee that you will be contacted if your application is incomplete. It is highly recommended that you follow up with the Scholarship Manager to check that your application has been received and marked completed. Please contact Renata De Freitas at [hope.rg.scholarship@gmail.com](mailto:hope.rg.scholarship@gmail.com) with any questions.

2. Once the Scholarship reaches the maximum number of applications for the given class/session, additional applications will be placed on a waiting list.

H.O.P.E. Rhythmic Gymnastics Program is committed to granting scholarships to as many qualified applicants as possible. We have a limited number of spots available in each class/session reserved for scholarship bearers.

**We will grant different percentages of tuition discounts based on your application. It will be granted 100%, 75%, 50%, 25% and 0% tuition discount according of your application profile for each Session.**

## H.O.P.E. Rhythmic Gymnastics Program Mission:

The Mission of the H.O.P.E. Rhythmic Gymnastics Program is to offer free or reduced-cost training opportunities to members of our community in an effort to make the sport more accessible to all.

Applications Requirements (Please read carefully all requirements):

- A. Completed copy of H.O.P.E. Scholarship Application. All applicants must provide an email address. Please fill out all lines neatly;
- B. Proof of income from prior tax year **OR a copy of your federal income tax return from the prior year;**
- C. Validation of employer from prior year **OR two most recent paychecks stubs or letter from your employer verifying your employment and stating your annual salary;**
- D. A copy of rental receipt OR mortgage statement reflecting monthly housing expenses for current year.

All financial assistance is distributed on a case-by-case, first come, first served basis. Please do not register for the program before you submit your financial assistance. We will register your child(ren) as we process your application.

The H.O.P.E. Scholarship Manager and H.O.P.E. President will review and make decisions on all applications. The Scholarship Program reserves the right to rescind any decision made and to revoke any scholarship offered. Scholarship recipients must demonstrate a strong commitment to excellence and must meet the requirements and 80% attendance standards in order to maintain her/his scholarship. Scholarship recipients are expected to participate to competitions and/or practices according to H.O.P.E. President's determinations.

Scholarships are awarded as per criteria including items above but not limited to them including applicant's demonstrated commitment to the program and behavior during classes. Absences are also taken into consideration and we strong advice that parent notify staff members of absences in advance.

***Date Received:***

***All docs Attached: Y or N***

# H.O.P.E. Scholarship Form

**Child(ren) Name(s)/DOB:** \_\_\_\_\_

\_\_\_\_\_

**Parents Names:** \_\_\_\_\_

New Application: Y ☐ N ☐ Renewal Applications: Y ☐ N ☐

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

Phone #: \_\_\_\_\_ Mobile # \_\_\_\_\_

Email: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

**Spouse and Dependents living at Home (Please complete):**

Tax forms must reflect those that are listed below.

Name	Employer/School	DOB	Gender	Relationship

Is yours a one-adult household? Yes ☐ No ☐ Not Applicable ☐

**Please itemize your gross annual household income. Documentation is required.**

		Your Income	Spouse's Income	Other Income
Salary, wages and tips	\$			
Unemployment compensation	\$			
Social Security compensations	\$			
Child support	\$			
Aid for Dependent Children	\$			
Food stamps	\$			
Alimony	\$			
Housing allowance	\$			
Other	\$			
<b>Total Annual Income</b>	<b>\$</b>			

**Property/Housing:**

Do you (check one): Own \_\_\_\_\_ Rent \_\_\_\_\_

Annual Mortgage: \$ \_\_\_\_\_ Annual Rent: \$ \_\_\_\_\_

**Please use the space below to describe any additional circumstances that impact your need for scholarship.**

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I hereby state that the information contained herein is true:

Parent 1 signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent 2 signature: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that this information is true and complete to the best of my knowledge. I grant permission to H.O.P.E. RG to verify this information. I agree to notify H.O.P.E. RG if my financial status should change.

All information submitted will be used solely for the H.O.P.E. Scholarship Application Process for the given class/session and will not be shared with third parties.

H.O.P.E. RG admits students of any race, gender, color and ethnic origin to all rights, privileges, programs and activities generally accorded and made available to students at H.O.P.E. RG. It does not discriminate on the basis of race, gender, color or ethnic origin in administration of its administered programs or policies.