DAKOTA RIDGE SPORTS ASSOCIATION

SCHOLARSHIP PROGRAM

APPLICTION AND INSTRUCTIONS

Dakota Ridge Sports Association is a non-profit organization with limited funding for scholarship athletes. However, the Dakota Ridge Sports Association Board of Directors will try their best to help qualified applicants. Please apply as soon as possible. All applications MUST be submitted prior to the fee payment deadline for the sport you are applying for a scholarship.

*****IN ORDER TO PROVIDE AS MANY SCHOLARSHIPS AS POSSIBLE TO FAMILIES IN NEED IN OUR COMMUNITY, AN ATHLETE/FAMILY MAY NOT RECEIVE MORE THAN TWO CONSECUTIVE FULL SCHOLARSHIPS*****

REQUIREMENTS FOR ELIGIBILITY

****Athlete MUST be eligible to participate in a Dakota Ridge Sports Association youth sport...**

****Parents/Guardians of the scholarship athlete commit that the athlete will attend a minimum of 80% of scheduled practices and games. If this is not met the scholarship will be revoked and the athlete will be removed from the roster…**

**Parents/Guardians/Athletes will volunteer time at a Dakota Ridge Sports Association event/events (tournaments, office work, game/gym/field monitor, or any other area that Dakota Ridge Sports Association might require volunteer help in), if needed, during the season that the scholarship is in effect…

**Athlete's family account with Dakota Ridge Sports Association MUST be in good standing and have no past due balances…

**Athletes family DOES NOT need to receive government assistance to apply.

DOCUMENTATION REQUIREMENTS

**STATEMENT OF FINANCIAL HARDSHIP – written by the athlete's parent/guardian as to why the scholarship is being applied for…

**TERMS AND CONDITIONS STATEMENT – must be read and signed by the athlete's parent/guardian…

**Written recommendation from school representative, community center worker, or social services worker (NOT REQUIRED BUT HELPFUL) …

**Proof of receipt of assistance from government sponsored programs (copies accepted) such as SNAP, Medicaid, SSI, Foster Care, WIC, and Free Reduced School Lunch (NOT REQUIRED BUT HELPFUL) …

HOW TO APPLY

**Fill out and sign Scholarship Application

**Sign TERMS AND CONDITIONS STATEMENT

**Write STATEMENT OF FINANCIAL HARDSHIP

Applications must be submitted to Dakota Ridge Sports Association prior to the fee payment deadline for the sport you are applying for a scholarship. APPLICATIONS WILL NOT BE ACCEPTED AFTER THE FEE PAYMENT DEADLINE FOR EACH SPORT. Applications may be mailed, emailed, or brought to the Dakota Ridge Sports Association office.

The application packet must be 100% completed and contain all required documents and if applicable, all supporting documentation. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

Approval/Denial of all scholarship applications and the dollar amount awarded is at the sole discretion of the Dakota Ridge Sports Association Board of Directors. ***If a partial scholarship is awarded to an athlete's family, and a payment plan is offered to help with the completion of the payment of the remaining balance, the payment plan must strictly be adhered to. If payments for the payment plan are not made ON TIME and for the AGREED UPON AMOUNT, the scholarship will be revoked and the athlete will be removed from the roster.

If you have questions, please call our office at 720-339-4962 or email at drsaom@hotmail.com.

Applications and required documents may be mailed to:

7112 W Jefferson Avenue

Suite 306

Lakewood, CO 80235

Dakota Ridge Sports Association does not discriminate because of color, race, nationality, age, sex, sexual orientation, or religion.

SCHOLARSHIP TERMS AND CONDITIONS STATEMENT

"I", "Me", and "My" refer to Adult Parent/Guardian of the athlete.

1. **I certify that the information provided for the Dakota Ridge Sports Association scholarship application is true and correct to the best of my knowledge.**
2. **I understand that Dakota Ridge Sports Association, through the awarding of a scholarship, shall not be liable for any damage or injury occurring to the athlete, the facility, or other participants in the sport which the scholarship is being used.**
3. **I understand that I and/or family members must volunteer time, if needed, at Dakota Ridge Sports Association events during the season that the scholarship is in effect. These include, but are not limited to tournaments, office work, game/gym/field monitor, or any other area that Dakota Ridge Sports Association might require volunteer help.**
4. **I understand that transportation to/from team practices and games for the scholarship recipient is my responsibility.**
5. **I understand that I am responsible for any equipment required for the scholarship recipient's participation in the sport the scholarship was awarded.**
6. **I understand that awarded scholarships will not be paid directly to me, but will be applied to my family account, and there will be no monetary exchange between myself and Dakota Ridge Sports Association, therefore no money or credit will be refunded to me.**
7. **I understand that if any written statements or documents submitted by myself or others regarding this scholarship application are found to be intentionally false, misleading, or inaccurate, the scholarship will be immediately revoked, and the full value of that scholarship will be payable immediately to Dakota Ridge Sports Association.**
8. **I understand that if the scholarship recipient quits playing the sport that the scholarship was awarded for anytime during that sport's season, or fails to attend 80% of games and practices, the scholarship will be revoked, and the athlete will be removed from the roster.**
9. **I understand that all scholarship applications and subsequent dollar amounts will be evaluated and awarded at the sole discretion of the Dakota Ridge Sports Association Board of Directors.**
10. **I understand that this scholarship application is private and will not be shared with anyone other than representatives of Dakota Ridge Sports Association.**
11. **I understand that I must provide a true and complete W-9 form and any other applicable tax obligations to the IRS that may result from this scholarship.**
12. **I understand that this scholarship application must be 100% complete and contain all required documentation, as well as any optional supporting documentation, and will be immediately denied if it is incomplete in any way.**
13. **I understand that, if applicable, my account with Dakota Ridge Sports Association must be in good standing and may not contain any past due balances.**

14. **I understand that the athlete I am applying for a scholarship for may not receive more than two consecutive full scholarships.**

Printed Name of Parent/Guardian

Signature

Name of Scholarship Athlete

DAKOTA RIDGE SPORTS ASSOCIATION SCHOLARSHIP APPLICATION

Athletes Name:

Age:

Date of Birth:

School Athlete Attends:

Grade:

Athlete Lives With? Both Parents Mother Father Other (Names)

Street Address:

City:

State:

Zip Code:

Dakota Ridge High School Area? YES NO

Scholarship Requested for What Sport:

FULL PARTIAL$ (Please list dollar amount needed)

Current Total Household Income:

Number of Dependents in Household Last Tax Year:

Do you currently receive any State of Federal Assistance: YES NO

If YES, what type?

Is this your only source of income?

PLEASE PROVIDE ALL SUPPORTING DOCUMENTATION FOR ANY STATE OR FEDERAL ASSISTANCE YOU RECEIVE

Father/Guardian Name:

Street Address (If different from athlete):

City (If different from athlete):

State (If different from athlete):

Zip Code (If different form athlete)

Occupation:

Personal Phone:

Work Phone:

Mother/Guardian Name:

Street Address (If different from athlete):

City (If different from athlete):

State (If different from athlete):

Zip Code (If different from athlete):

Occupation:

Personal Phone:

Work Phone:

Has ANY member of your family received and Athletic Scholarship from Dakota Ridge Sports Association or any other Sports Association in the past 3 Years?

YES NO

If YES, what Sports Association:

CONSENT TO RELEASE INFORMATION:

I understand that my signature authorizes Dakota Ridge Sports Association to obtain verification of all information on this application. I certify that all information on this application and all information provided in connection with this application are true and correct.

_____ _____

Parent/Guardian Signature **Date**