



YMCA of the Fox Cities

www.ymcafoxcities.org



We Build Strong Kids, Strong Families, Strong Communities

Scholarship Assistance Form

Scholarship Statement

The YMCA believes in providing membership and program services to all who desire to participate in the YMCA. If you are interested in making the YMCA a part of your life, but feel you cannot afford the regular rates, you may be awarded a partial scholarship of assistance. The scholarship program, supported in part through contributions to the YMCA Strong Kids Campaign, provides membership and program scholarships for those in need within our available resources. Scholarships are granted on a sliding fee basis, using your household gross monthly income and household size as a guideline.

How to Apply

1. In order for us to process your application, you must complete the confidential form included. Please submit copies (NO originals) of the following documents:

- ◆ **Required: Copy of most recent tax return/W2/1099 forms OR 'Taxes not filed' letter from IRS**
- ◆ **Required: Copy of two recent payroll stubs OR Copy of unemployment check stubs**
- ◆ If Applicable: Verification of any other assistance received (food stamps, child support, housing assistance, etc)
- ◆ If Applicable: Social Security income verification (tax return not required)

2. **After all** paperwork has been completed, contact the Member Services desk for scholarship meeting times. The meeting will last between 15-30 minutes.

Selection Process

Eligibility for financial assistance will be determined by the appropriate staff, based on a thorough review of the application and a personal interview with the applicant. The length of program assistance will be reviewed every three to nine months, not exceeding twelve months. You will be asked to complete a new scholarship assistance form for all renewals. Failure to report any form of income may result in the termination or delay of scholarship assistance from the YMCA. The YMCA of the Fox Cities reserves the right to refuse assistance to any applicant.

Appleton
218 E Lawrence
Appleton, WI 54911
920-739-6135

Apple Creek
2851 E Apple Creek Rd
Appleton, WI 54913
920-733-9622

Camp Nan A Bo Sho
18369 Okonto Ln
Lakewood, WI 54138
920-729-9622

Fox West
W6931 School Rd
Greenville, WI 54942
920-757-9820

Heart of the Valley
225 W Kennedy Ave
Kimberly, WI 54136
920-830-5700

Neenah-Menasha
110 W N Water St
Neenah, WI 54956
920-729-9622

YMCA of the Fox Cities Mission: The YMCA is a not for profit organization which seeks to put Christian principles into practice through programs that build healthy spirit, mind, and body for all.

Monthly Household Income

Gross Monthly Income \$ _____
 Spouse/Partner Earnings \$ _____
 Unemployment \$ _____
 SS \$ _____
 SSI \$ _____

 Investment Income \$ _____
 (Rental Property, Etc.)
 Other income \$ _____
Total Monthly Income \$ _____

ASSISTANCE:

Family Assistance \$ _____
 Child Care Assistance \$ _____
 Medical Assistance \$ _____
 Government Assistance \$ _____
 Housing Subsidy \$ _____
 Food Stamps \$ _____
 Tuition/Grant \$ _____
 Maintenance/Child Support \$ _____
 Foster Care Payments \$ _____

Assets:

Savings \$ _____

Total Monthly Assistance \$ _____

Details of other income:

Provide details and copies of other expenses:

Please explain any special circumstances that you wish us to consider:

What can you afford to pay toward your monthly dues? \$ _____

Monthly Household Expenses

Mortgage/Rent \$ _____
 Food \$ _____
 Utilities \$ _____
 (Gas/Phone/Electric/Etc.)
 Transportation \$ _____
 (Car loan/Gas/Ins.)

 Medical Costs \$ _____
 Child Care \$ _____
 Child Support \$ _____
 Life Insurance \$ _____
 Cell Phone \$ _____
 Cable \$ _____
 Internet \$ _____
 Other _____ \$ _____

Do you have anyone else living in your household who is not listed on the previous page: Yes No
 Who? _____

Total Monthly Expenses \$ _____

Staff Notes:
