



Scholarship Application

All scholarships are limited and distributed based on a financial need and first-come, first-serve basis. We respectfully request applicant families meet the following annual income criteria* or lower:

Number of Persons in Household <small>(*Humboldt County HUD low income limits; Report 4/1/18)</small>				
2	3	4	5	6
\$38,200	\$43,000	\$47,750	\$51,600	\$55,250

To receive a scholarship, all information on this form must be completed. We will call you to inform you of your scholarship status.

Applicant's full name: _____

Program and class for which scholarship is requested: Youth Assistant Keeper (YAK)

Why do you feel you should receive a scholarship? _____

Additional comments: _____

Signature of applicant: _____ **Date** _____

I, the undersigned, acknowledge that the information submitted on this application is correct.

Signature of Parent/Guardian: _____ **Date** _____

Phone Number: _____ **Email:** _____

<i>For office use only</i>		
Amount awarded: _____	Sponsors name: _____	Notes: _____

