

The mission of the Kirksville Parks and Recreation Department is to improve the lives of all Kirksville citizens, maintain high quality parks and facilities, offer exceptional programming, and enrich the identity of this community through special events.

The Kirksville Parks and Recreation Scholarship Program was established with the primary goal of promoting accessibility and inclusivity within our community by providing assistance towards financial barriers that may prevent some individuals and families from participating in our diverse range of recreational activities and programs.

ELIGIBILITY

To be eligible for a scholarship **you must reside within the city limits of Kirksville** and meet the household size/yearly income requirements. Applicants meeting the eligibility guidelines are awarded a 50% scholarship on programs, events, and youth pool passes.

Household Size	Annually	Monthly	Weekly
1	\$ 27,861	\$ 2,322	\$ 536
2	\$ 37,814	\$ 3,152	\$ 728
3	\$ 47,767	\$ 3,981	\$ 919
4	\$ 57,720	\$ 4,810	\$ 1,110
5	\$ 67,673	\$ 5,640	\$ 1,302
6	\$ 77,626	\$ 6,469	\$ 1,493
7	\$ 87,579	\$ 7,299	\$ 1,685
8	\$ 97,532	\$ 8,128	\$ 1,876
For each additional person add:	\$ 9,953	\$ 830	\$ 192

INSTRUCTIONS

Please complete the attached application ensuring all fields are completed to the best of your ability. Attach a copy of your supporting documentation and return to the Kirksville Parks and recreation office located at the Kirksville Aquatic Center, 801 E. Mill St. Kirksville, MO 63501. All information will remain confidential. Submitted materials will not be returned.

EXAMPLES OF SUPPORTING DOCUMENTS (Please provide one)

PREFERRED

Current years Free or Reduced Meals School Letter

OTHER

- Previous years Federal Tax Return Form1040 or 1040A
- Supplemental Security Income Letter

SCHOLARSHIP APLLICATIONS MUST BE APPROVED PRIOR TO REGISTRATION

A scholarship application alone does not register the participant, nor does it reserve space in a program. Registrations are processed in the order received. You will be notified once your application for scholarship has been reviewed.



PLEASE ATTACH COPIES OF SUPPORTING DOCUMENTS TO THE SCHOLARSHIP APPLICATION FREE OR REDUCED SCHOOL MEALS LETTER SSI LETTER TAX RETURN LIST OF HOUSEHOLD MEMBERS Parent/Guardian First Name Parent/Guardian Last Name Date of Birth Household Member First Name Household Member Last Name Date of Birth Household Member First Name Household Member Last Name Date of Birth

Name				
Address:	City:	State:	Zip:	
Cell Phone:	E-mail Address:			
Household Size:	Yearly Household Income Before Taxes: \$			

QUALIFYING INCOME GUIDELINES FOR SCHOLARSHIP PROGRAM								
Household Size	1	2	3	4	5	6	7	8
Annual Income	\$27,861	\$37,814	\$47,767	\$57,720	\$67,673	\$77,626	\$87,579	\$97,532
For Each Additional Family Member Add \$9,653								

I certify that the above information is correct to the best of my knowledge. I reside within the city limits of Kirksville, and I understand that all fees remaining after a scholarship has been applied are my responsibility and must be paid at the time of registration.

NI		
Name:		

Signature:

Date:

If you have questions related to the scholarship program or application, or if you are outside qualifying parameters and have extenuating circumstances, please contact:

- Email: lcallaghan@kirksville.gov
- Call: 660.627.1485, ext. #3
- In person at the Kirksville Parks and Recreation office located at the Kirksville Aquatic Center

Processed Date:	Approved By (print) Initial				
Approved Denied Exception	Comments:				
Staff Name:					

OFFICE USE ONLY