



**City of Reno**  
**Parks, Recreation, and Community Services**  
Administration Office, City Hall  
1 East 1<sup>st</sup> Street, 11<sup>th</sup> floor, Reno, NV 89501  
(775)334-2260 (phone)      (775)334-2449 (fax)      [www.reno.gov](http://www.reno.gov)

### **SCHOLARSHIP PROGRAM GUIDELINES**

- All scholarships remain in effect for one calendar year from January 1 – December 31
- City of Reno Scholarships is awarded at 20%, 40% and 60% of the program cost. The level of the scholarship is determined by the household income according to the sliding scale as indicated by the State of Nevada Subsidy Programs Household Size and Monthly Income Chart.
- A maximum of \$500 is granted per individual per year.
- **To complete the approval process you need to submit verification of gross income for the 30 day period prior to the date the application is signed. A complete application can take up to 10 days to process once received at the Administration Office.**
- 30 days of income verification required. Wages may be verified with pay stubs. If you have just started work or have not been employed for 30 days, a letter from your employer with the date you started employment, the average hours worked per week and the rate of pay per hour will be required. The information on the letter must also include your employer's phone number and address. Other income such as social security, pensions and retirement accounts must be submitted and verified with appropriate documentation. All sources of income are required on the application.
- Scholarships may be revoked at any time due to lack of funding, income changes or applicant fraud.
- Food stamps and/or housing assistance do not need to be verified.
- Proof of City of Reno residency is required (i.e., current driver's license, real estate tax bill, and voter registration card, or monthly bill proving current address is acceptable). An exception is for youth before and after school programs and full day camps.
- Unemployed – 30 day scholarship – once a year exception. Must have proof of income.



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### Scholarship Application

Please print! This is a two sided form; both sides must be filled out completely. Please do not leave any section blank. If section does not apply, please enter "n/a". To be considered for scholarship assistance, you **MUST** attach proof of ALL income, school/training program enrollment and other income/public assistance for the past 30 days. Proof of Reno residency is required (i.e. current drivers license, real estate tax bill, voter registration card, or monthly utility bill with current address is acceptable). An exception is for youth before and after school program and full day camps.

Approved scholarships are effective for the calendar year, January 1 – December 31.

**SCHOLARSHIP REQUESTS WILL NOT BE PROCESSED WITHOUT THE FOLLOWING INFORMATION.**  
 Please allow 10 business days for processing.

Applicant Name: \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Home address (physical address only) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

List all **ADULTS** living at this address (including applicant) and attach proof of income: This includes employment, self-employment and odd jobs. If adult has not been employed within the last 30 days enter "none".

Applicant Name	Relationship	Gender	Date of Birth
Employer Name and Phone			
Name (Adult)	Relationship	Gender	Date of Birth
Employer Name and Phone			
Name (Adult)	Relationship	Gender	Date of Birth
Employer Name and Phone			

**OTHER HOUSEHOLD INCOME:** All income received in the last 30 days must be listed and verified by documentation.

- 01)Alimony/Child Support     08)Interest     15)Royalties     21)Temporary Disability
- 02)Contributions / Gifts     09)Loans     16)Social Security Disability     22)Tips
- 03)Dividends     10)Lump Sum Payments     17)Social Security Retirement     23)Unemployment
- 04)Educational Assistance     11)Military Allotments     18)Social Security Survivors     24)Veterans' Benefits
- 05)Food Stamps     12)Pell Grants     19)Supplemental Security Income     25)Winnings
- 06)Foster Care Payments     13)Pensions / Trust     20)TANF     26)Worker's Comp
- 07)Insurance Settlements     14)Railroad Retirement
- Other: \_\_\_\_\_

Income Type #	Amount	How Often is the Income Received	Who Receives the Income
<i>Example: 05</i>	<i>\$250.00</i>	<i>Monthly</i>	<i>Family</i>

<p><b>Full Time Students need to submit by Semester/Quarter/Class Period:</b></p> <p>Copy of Class Schedule</p> <p>Copy of Sources of Income: Letter from private party, Gifts/Support, Grants, Student Loans</p>
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**Child(ren) Information**

Child Name	Do both parents reside in the home?		Do you Receive Child Support?*		If so, how often	Amount of Child Support	Date of Birth	Is child Male or Female		Relationship to Applicant
	Yes	No	Yes	No				M	F	
	Yes	No	Yes	No				M	F	
	Yes	No	Yes	No				M	F	
	Yes	No	Yes	No				M	F	
	Yes	No	Yes	No				M	F	

**AUTHORIZATION / RESPONSIBILITY:** Consent is granted by this form to disclose or release information that is protected by the Privacy Act to appropriate Federal, State and Local agencies. This authorization includes, and is not limited to, the above statistical, income, employment, and educational information. I also understand that deliberate misrepresentation of information subjects the applicant to being disqualified for scholarship consideration. I hereby certify that all the above information is true and correct to the best of my knowledge and belief.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_