



LOS ALAMOS

RECREATION DIVISION

Financial Assistance Request Application

(Aquatic, Recreation, Ice Rink, and Golf Course)

For Office Use Only:
Approved
Approved Amount
Program Name Approved

NAME OF APPLICANT: EMPLOYER:

HOME/CELL PHONE: WORK/CELL PHONE:

E-MAIL ADDRESS:

SPOUSE'S NAME: EMPLOYER:

Award approval is based on the most recent federal income tax return noting the number of exemptions in the household and the adjusted gross income.

AS INDICATED ON YOUR MOST RECENT TAX FORM: # OF EXEMPTIONS: (Adults Children)

ADJUSTED GROSS INCOME: Please indicate the Adjusted Gross Income from your most recent IRS Form 1040 (Line #37), 1040EZ, etc.

HOUSEHOLD'S ADJUSTED GROSS INCOME \$

PLEASE ATTACH COPIES OF THE FOLLOWING DOCUMENTS TO THIS APPLICATION FOR CONSIDERATION OF ASSISTANCE:

- MOST RECENT FEDERAL INCOME TAX RETURN (First page only with SSN's marked out.)
IF EMPLOYED IN LOS ALAMOS COUNTY: MOST RECENT PAYCHECK STUB
PROOF OF RESIDENCY (If you have a PO Box or have moved since filing your last tax return)

PROGRAM: PROGRAM FEE:

SCHOLARSHIP REQUEST FOR: Youth Adult Senior Family

NAME OF PERSON(S) ENROLLED IN PROGRAM:

BRIEFLY EXPLAIN WHY YOU BELIEVE YOU QUALIFY FOR FINANCIAL ASSISTANCE:

Because the Recreation Division Assistance Fund is limited, please consider how much of the program you feel you can pay so we can make the funds available to as many people in the community as possible. \$

Signature of Applicant: DATE:

Table with 5 columns: R/N-R, % of Guidelines, People in House, Adjusted Income, % of Assistance