

NEWTON AREA SOCCER ASSOCIATION

INSTRUCTIONS

- COMPLETE APPLICATION BELOW- A NEW APPLICATION IS REQUIRED FOR EACH SEASON
- INCLUDE ALL REQUIRED DOCUMENTATION
- SIGN AND DATE THE APPLICATION
- SUBMIT APPLICATION TO <u>PRESIDENT@NEWTONAREASOCCER.COM</u> BY THE REGISTRATION DEADLINE

FINANCIAL AID APPLICATION

PARENT I NAME					_ DOR	
ADDRESS		c	ITY	STATE		_ZIP
PHONE	EMAIL					
PARENT 2 NAME					_ DOB _	
ADDRESS		C	ITY	STATE		_ZIP
PHONE	EMAIL					
MARITAL STATUS (CIRCLE ONE):	MARRIED	SINGLE	DIVORCED	SEPARATED	GUARD	IANSHIP
PLACE OF EMPLOYMENT (PARENT	1)					
PLACE OF EMPLOYMENT (PARENT	2)					
PARTICIPANTS NAME					_DOB_	
DEPENDENT CHILDREN IN THE HO	ME:					
NAME		DOB		_ APPLYING FOR	NASA A	SSISTANCE? Y/N
NAME		DOB		_ APPLYING FOR	NASA A	SSISTANCE? Y/N
NAME		DOB		_ APPLYING FOR	NASA A	SSISTANCE? Y/N
NAME		DOB		_ APPLYING FOR	NASA A	SSISTANCE? Y/N
LEVEL OF SCHOLARSHIP REQUEST	ED (CIRCLE ON	IE): 50	% 75%	100%		
DOCUMENTATION						
Please include any <i>two</i> of the follo	owing at attac	h to vour a	pplication.			
☐ Copy of payroll check stub	_	·				
☐ Copy of approval for unen	•		•	ree months)		
☐ Benefit statement/approv		•		•	hin the l	act civ months)
☐ Approval letter for free/re		•	ing approvari	or penemes (wit	inii uie i	ast six infolities)
☐ Social security benefit lett	•	A11011				
☐ Energy assistance award lo						
- Life by assistance award in						

☐ Other documents to be approved by NASA board upon application.

IN YOUR OWN WORDS, BRIEFLY EXPLAIN WHY THIS APPLICANT SHOULD BE CONSIDERED FOR SCHOLARSHIP					
ASSISTANCE:					
AVAILABLE FO THAN FIVE D	UNDING, AND MEETING DEA AYS AFTER THE APPLICATION	DLINE REQUIREMENTS. RECIP	ASIS BASED ON DEMONSTRATED NEED, PIENTS WILL BE NOTIFIED VIA EMAIL NO LATER THE SCHOLARSHIP PROGRAM IS SEPARATE AM.		
IF A SCHOLAF	RSHIP IS AWARDED, WOULD	YOU BE WILLING TO VOLUNTE	EER IN SOME WAY THROUGHOUT THE SEASON?		
YES	NO				
IF YES, WHAT	T IS YOUR PREFERENCE (FIELD	PAINTING, COACHING, FIELD	MAINTENANCE, ETC)		
l,			ICATION ON BEHALF OF		
			S NOT GUARANTEE A SPOT ON A ROSTER AND		
		CHOLARSHIP APPLICATION. I A REIN IS ACCURATE AND TRUTI	ALSO ATTEST, TO THE BEST OF MY KNOWLEDGE,		
INAL INCIN	FORMATION CONTAINED HE	REIN IS ACCURATE AND TRUTI	nrot.		
PARENT/GUA	ARDIAN SIGNATURE		DATE		
	•				
		_			
(Newton Area Socce	r Association			
BOARD USE	ONLY				
Date Receive	ed	Board Member _			
APPROVED _					
DENIED	REASON				