

# **2010 St. Paul Blackhawks Scholarship Program**

**U9-U11 Deadline February 15, 2010**

## **BACKGROUND**

St. Paul Blackhawks is committed to providing a high-quality, affordable youth soccer program. While we try hard to keep club fees as low as possible, we realize that paying the full amount can be a hardship for some families. The scholarship program exists to help ensure that no one is prevented from playing in Blackhawks for financial reasons

## **SCHOLARSHIP AWARDS**

Scholarship levels vary according to need, based on factors such as family income, family size, and player age.

Our goal is to offer some assistance to every family that demonstrates need. Budget constraints may not allow us, however, to give everyone the level of aid they believe adequate. In such cases, families are encouraged to contact the Scholarship Director to discuss other possible sources of assistance.

Families with children receiving free or reduced-cost school lunch are presumed eligible for scholarship aid. Other families may also be eligible, and any family that feels it has need of scholarship should submit an application. Special circumstances - such as large medical expenses not covered by insurance – will be considered. Please include an explanation of such circumstances in the scholarship application.

If you receive a scholarship, it will be used to pay membership dues. You are responsible for paying other expenses the scholarship award does not cover, such as the cost of the uniform and tournament fees.

## **CONFIDENTIALITY**

All financial information is maintained in strict confidence and may be accessed only by the Scholarship Director. Names of scholarship recipients and the level of scholarship assistance awarded are disseminated narrowly on a need-to-know basis to the club administrator, club treasurer, and relevant age group coordinators and team managers.

## APPLICATION PROCEDURE

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**STEP 1:** Fill out Part 1 of the application online at [www.blackhawksoccer.org](http://www.blackhawksoccer.org).

**STEP 2:** Print and fill out Part 2 of the application.

**STEP 3: Gather supporting materials.** Make copies of your latest Federal and State income tax returns, which are the best proof of income and family size. If you do not have these, you can use copies of other documents from the following list, but we may ask you for the income tax forms if the other documents do not provide enough information.

- Current paycheck stubs for all earners in household
- Proof of eligibility for school lunch program or other assistance
- Financial aid application and award statement from private/parochial school
- Statement of extraordinary circumstances that make it difficult to pay club membership dues

**STEP 4: Mail Part 2 and supporting materials** to Scholarship Director by February 15, 2009. This information will be kept strictly confidential. Scholarship Director mailing address:

Charlie Nauen  
100 Washington Avenue South, Suite 2200  
Minneapolis, MN 55401

### Questions about scholarships?

Contact Joe Crosby at [info@blackhawksoccer.org](mailto:info@blackhawksoccer.org) or 651-605-1410, or our Blackhawks Scholarship Director at [cnnauen@locklaw.com](mailto:cnnauen@locklaw.com) or 612-596-4006.

You will receive notification of your award and payments due, if any, via email.

**\*\*NOTE:** *If you do not have access to the internet, please call Joe Crosby to complete Part 1 by phone and to request having Part 2 sent by mail.*

## Part 2 SCHOLARSHIP APPLICATION

Mail this form with supporting materials to:

**Charlie Nauen, 100 Washington Avenue South, Suite 2200, Minneapolis, MN 55401**

### PARENT OR GUARDIAN:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Phone \_\_\_\_\_

Street Address \_\_\_\_\_

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

### PLAYER 1:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Age Group (circle) **U9 U10 U11** Gender (circle) **M F**

### PLAYER 2:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Age Group (circle) **U9 U10 U11** Gender (circle) **M F**

### PLAYER 3:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Age Group (circle) **U9 U10 U11** Gender (circle) **M F**

### INCOME:

Annual Household income (before taxes) \_\_\_\_\_

How many are supported by income? \_\_\_\_\_

### ASSISTANCE RECEIVED:

Child support? Yes No

Subsidized housing? Yes No

Food stamps? Yes No

Medical assistance? Yes No

Reduced or free school lunch? Yes No

School tuition assistance? Yes No

Other (describe) \_\_\_\_\_

**Please attach supporting documents to this form and mail to: Charlie Nauen, 100 Washington Avenue South, Suite 2200, Minneapolis, MN 55401**

All statements in this application are true to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date