



# 2020-21 SCHOLARSHIP APPLICATION

**PLAYER NAME:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**FINANCIAL INFORMATION**

All applications must include a rent receipt or maintenance and mortgage statement, as well as the following documentation of income:

- Most recent tax return (Form 1040)
- Most pay stubs
- Public Assistance, Unemployment payment, social security/SSI income if applicable
- Most recent Rent/Mortgage Receipt

**TENNIS RECORDS**

- 2019 USTATournament Record (printed from USTA Tennislink)
- 2019 Year End Ranking \_\_\_\_\_
- Current Ranking \_\_\_\_\_

**ANNUAL INCOME - Gross annual income including all members of household**

- Salary/Earnings \$ \_\_\_\_\_
- Alimony and Child Support \$ \_\_\_\_\_
- Workers' Compensation/Unemployment/Disability \$ \_\_\_\_\_
- Interest, Dividends, Rental, Annuities, insurance \$ \_\_\_\_\_
- Social Security and/or Pension \$ \_\_\_\_\_
- Other (specify) \$ \_\_\_\_\_
- TOTAL HOUSEHOLD INCOME** \$ \_\_\_\_\_

**HOUSEHOLD INFORMATION**

- Are you currently unemployed? \_\_\_\_\_
- Have you been unemployed in the last two years? \_\_\_\_\_
- Do you own a car? If yes, how many along with model and year \_\_\_\_\_

**EXPENSES**

- Monthly housing costs (rent or mortgage and maintenance) \$ \_\_\_\_\_
- If you are paying school tuition for your child, what are your fees?  
(Attach any school tuition or scholarship information, if applicable) \$ \_\_\_\_\_
- If you have a scholarship what amount do you have? \$ \_\_\_\_\_
- If you have any additional unusually high expenses, please explain \$ \_\_\_\_\_

**PLEASE LIST ALL FAMILY MEMBERS INCLUDING PARENTS AND THE APPLICANT**

NAME OF FAMILY MEMBER	RELATIONSHIP TO APPLICANT	AGE	SCHOOL ATTENDING	YEAR IN SCHOOL



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## SCHOLARSHIP REQUEST

Total Cost \$ \_\_\_\_\_ Amount you can pay \$ \_\_\_\_\_ Scholarship Requested \$ \_\_\_\_\_

Reason for request (please be specific)

1. Financial assistance will be granted based on demonstrated need and on a first come, first serve basis. Full scholarship recipients will be required to pay a 10% administrative fee due at the time of the registration.
2. Scholarship recipients must adhere to the USTA Code of Conduct and NYJTL/Cary Leeds policies, or may lose their scholarship eligibility.
3. Agree to attend NYJTL events whenever possible.
4. Be an advocate of NYJTL and display exemplary behavior on and off the court.

Duration of scholarship will be for the 34 weeks; but will be reviewed after the first 17 weeks of the session. We reserve the right to revoke the scholarship at any time.

I certify to the best of my knowledge that the above information is true and accurate.

APPLICANT: \_\_\_\_\_ Date \_\_\_\_\_

PARENT/LEGAL GUARDIAN: \_\_\_\_\_ Date \_\_\_\_\_

### NYJTL Use Only

Amount Requested \$ \_\_\_\_\_ Amount Approved \$ \_\_\_\_\_ Family Contribution \$ \_\_\_\_\_

Approved By \_\_\_\_\_

\_\_\_\_\_ Date