



Robison Fund for Junior Programs Financial Assistance Application 2018-19 Season

Application for Juniors CITY

The Richmond Volleyball Club (RVC) provides financial assistance (for registration fee, team fee, and travel expense) to help eligible youth participate in our volleyball programs. This scholarship program provides assistance to youths who are not currently being served by existing scholarship or fee waiver programs.

Eligibility

To be eligible for assistance, a child must:

Qualify for or be currently receiving assistance from one or more of the programs listed below:		Meet each of the criteria below:
<ul style="list-style-type: none"> • Free or reduced school lunch • Temporary Assistance for Needy Families (TANF) • Aid for Dependent Children • Foster Care • Medicaid • Certain other extenuating circumstances 	AND	<ul style="list-style-type: none"> • Be enrolled in school (kindergarten through 12th grade) • Commit to attending all practices and tournaments unless excused • RVC account must remain in good standing

Priority may be given to eligible youth having played with RVC in the previous season.

To Apply

1. Applications must be submitted no later than **November 30, 2018**.
2. **Parents:** Complete the application on the reverse page. Ensure that the application has been signed by applicant. Attach official documents verifying the child is receiving aid. If such documents are not available, a school employee, social worker, or case worker must sign the form to verify eligibility.
3. If you have more than one child applying, please complete a separate application form for each child.

After eligible applicants are confirmed, selected applicants will be notified before their tryout session.

If you have any questions, please contact our office at (804) 358-3000 or rvc@rvc.net.

APPLICANT INFORMATION

Athlete's First Name _____ Athlete's Last Name _____

Grade ____ Date of Birth: ___/___/___ Number of siblings at RVC _____

Parent/Guardian Name (First, Last) _____

Address: _____

City: _____ Zip code: _____ Email _____

Parent Cell Phone #: _____ Day Phone #: _____

RVC team played on last season (if applicable): _____

INFORMATION NECESSARY TO EVALUATE FINANCIAL NEED

Status (circle one): Single Married Divorced/Separated **Rent/Own?** Rent Own

Monthly mortgage or rent payment: _____

Annual Household Income 2017: \$ _____ 2018: \$ _____ (estimated)

How much can your family afford to pay per month from November 2018 - October 2019 to play for Richmond Volleyball Club this season? _____

Describe any material differences in the expected income of the family in 2018/2019 as compared

to the previous two years (e.g., loss of job, any additional expenditures for siblings, medical bills, etc.):

Athletes and/or their families receiving financial assistance are expected to provide community service to RVC during the season in which they receive assistance. RVC is a 501(c)3 nonprofit and service may meet school requirements as well. Service may consist of assistance in the concession area, grounds maintenance, referee responsibilities, RVC special event staff, etc. What availability (hours/days of the week) does the athlete have and/or what availability do the parents/guardians have?

INFORMATION NECESSARY TO EVALUATE ELIGIBILITY

Please attach 2 references (teacher, former coach, etc.) attesting to the character of the athlete.

Please attach essay of 500 words or less describing why playing volleyball in general and at the Richmond Volleyball Club in particular are important to you. After the essay, please include any extracurricular activities you do outside of Richmond Volleyball Club. The essay should be completed by the athlete applying for financial aid.

Please attach documentation currently available, if any, demonstrating financial need.

PLEASE MAIL OR BRING ALL APPLICATONS IN A SEALED ENVELOPE TO THE ADDRESS BELOW

Athlete Signature: _____

Parent Signature: _____