



Titusville YMCA Scholarship Program

The Titusville YMCA offers quality, affordable programs and services designed to benefit people of all incomes and backgrounds. Through generous contributions from YMCA members and friends, no one is turned away from the YMCA due to the inability to pay. All records are kept confidential. A sliding scale is used to determine what level assistance will be awarded. You will be expected to pay a portion of your membership fee.

How to Apply for Financial Assistance at the Titusville YMCA:

1. Completely fill out the financial assistance application.
2. Turn in the application and provide complete financial verification to the YMCA member service desk (see income verification guidelines).
3. You may make monthly payments through the Bank Draft system for your portion of your membership or you may choose to pay cash for a minimum of three (3) months.

Income Verification Guidelines:

Financial assistance applicants must provide the following financial verification:

1. Last two (2) paycheck stubs --OR--
2. Government Assistance: Notice of Decision
3. Social Security Disability: Letter from Social Security Office or Notice of Decision stating the monthly benefit amount. This often needs to be accompanied by government assistance income as applicable.
4. Unemployed: Notification of eligible benefits from unemployment office. Federal tax return will still be needed, unemployment is taxable income.
5. Full-time college student: Letter from the registrar's office indicating a current full-time student status. A student schedule is not adequate documentation.
6. No Income: The YMCA needs the income verification of the person supporting the applicant. Example: John does not work and is living with his grandmother. Since she is providing him with room and board, the YMCA will need a letter from the grandmother stating the situation.
7. Information must be submitted every six (6) months if a change in income occurs. A change in income or situation may result in an adjustment in your scholarship award.



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Titusville YMCA Financial Assistance Application

Please Print Legibly

Name: _____ Birthdate: _____ M _____ F _____

Address: _____ City/State/Zip: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

Membership Type: Pre-School (Ages 3-5) _____ Youth (Ages 6-12) _____ Student (Ages 13-17) _____ College _____
Adult _____ Family _____ Single Parent Family _____ Senior _____

Please list all family members in the household:

Spouse/Partner _____ Date of Birth _____ M ___ F ___ Relationship _____

Dependent _____ Date of Birth _____ M ___ F ___ Relationship _____

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Financial Information: Please list all household income from all sources, along with copies as proof.

\$ _____ Gross paycheck(s)

\$ _____ Alimony/Dependent Support

\$ _____ Supplemental support (Veterans benefits, Social Security, public assistance, etc.)

\$ _____ Other income (in-home business, childcare, etc.)

\$ _____ Total monthly income

Additionally, you MUST supply the most recent copy of your Federal Tax Return in order to be considered for financial assistance.

By my signature, I am requesting assistance from the YMCA due to my personal circumstances and I certify that all information provided is correct. I agree to notify the Titusville YMCA of any changes to my financial circumstances.

SIGNATURE

DATE

YMCA use only:

Type of membership	Cost	Level of cost	Final cost
Payment arrangements		CEO approval	

The Titusville YMCA is committed to the policy that all persons shall have access to all of its programs, facilities and employment without discrimination based upon race, religion, color, creed, sex, national origin, age, physical or mental disability or financial hardship.

