

# Skating Club of Jackson Hole

## Scholarship Application

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**Skater's Name:** \_\_\_\_\_

Grade in School: \_\_\_\_\_ Birth date: \_\_\_\_\_

Skating Level:  Learn to Skate  Aspire  Advanced

Scholarship requested for:  24/25 Season Fall & Winter (**application due 8/1/24**)

2024 Fall Semester only (**application due 8/1/24**)

2025 Winter Semester only (**application due 12/1/24**)

Have you requested and received previous SCJH scholarships?  Yes  No

If yes, how many years? \_\_\_\_\_

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### Family Information

Parent or Legal Guardian: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Primary Employer: \_\_\_\_\_

Parent or Legal Guardian: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Primary Employer: \_\_\_\_\_

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### Financial Need

Household Annual Income:        \$   

SCJH Scholarships are considered and granted based on the following criteria:

- 1) Availability of funds, maximum of 50% per child applicant
  - 2) Financial need of parent(s) and child applicant
  - 3) Special personal circumstances
  - 4) Number of years in SCJH
  - 5) There must be no balance owed from previous years of skating
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- The SCJH Scholarship Program is intended to be a financial assistance program for those who meet the qualifying criteria and are committed to the Skating Club.
  - Scholarship recipients are required to complete volunteer hours with the Club in exchange for scholarship financial assistance. Hours are valued at \$50 per volunteer hour.
  - U.S. Figure Skating Association membership fees are the responsibility of the member and will not be considered in the amount of scholarship awarded.
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Please call Christina Mizelle with any questions, 307-699-5763.

**Email completed applications to Christina Mizelle at [wyoingmizelles@gmail.com](mailto:wyoingmizelles@gmail.com) by the due date.**

# SCJH Scholarship Application

I understand that I am responsible for submitting the following in order to apply and be considered for a scholarship and that a late / or incomplete application will not be considered:



- Completed SCJH Scholarship Application Form
- Copy of the 1st page and signature page, of the previous year's income tax return filed by the parent(s) or guardian(s) of Skaters applicant. (NOTE: If the parents do not file jointly, or are separated/divorced, tax returns from both parents are required). SCJH will destroy all legal and tax forms after scholarships have been awarded.
- I hereby certify that the information on this form is accurate and I understand that the SCJH Executive Board may verify this information and I give authorization to SCJH Executive Board to verify the information contained within this application. Deliberate misrepresentation may result in termination of further financial assistance.
- I understand that any financial assistance is granted through a confidential Board process based on the outlined criteria and there is no guarantee of an amount granted based on the submittal of this application.
- I understand and agree to abide by the SCJH terms and conditions of accepting the scholarship.
- I understand that continued financial support may be terminated if these conditions are not met.
- SCJH's scholarships can be awarded for the year or seasonally. I understand that I must reapply for consideration each year or season based on the type of scholarship awarded.

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Parent or Legal Guardian 1 Signature

Date

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Parent or Legal Guardian 1 Print name

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Parent or Legal Guardian 2 Signature

Date

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Parent or Legal Guardian 1 Print name

SCJH Executive Board Use ONLY:	
Date Application Package Received:	Date Application Package Reviewed:
Received by:	Application Package Compete/ Incomplete
Reviewed by:	Missing Information:
Application Approved or Denied:	
Notes:	
	Scholarship % or Amount Granted:
	Date Parent(s) Applicant Notified