



Austin Rowing Club

Scholarship Application

ABOUT ARC SCHOLARSHIPS:

ARC Membership Scholarship Program: (includes Fitness Memberships and Rowing Memberships) Austin Rowing Club will award 50% or 100%, dues scholarships for these programs. Programming fees are not included.

Scholarships will be awarded during the following dates (Spring: Jan – May, Summer: June – August, Fall: September – December). Application deadlines will be the 15th of the month preceding each window. May 15th for summer applications, August 15th for fall applications and December 15th for spring applications

Notification happens after application is received and reviewed by the Austin Rowing Club Board of Directors. Scholarships awarded will never be automatically renewed. Applicants must resubmit their application each year.

SCHOLARSHIP APPLICATION:

Student/Applicant Name:

Primary Parent/Guardian Name:

Secondary Parent/Guardian Name:

Home Phone: () _____

Cell Phone: () _____

Work Phone: () _____

Address: _____ Apt #: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Scholarship Applying For: Spring _____ Summer _____ Fall _____ 50% _____ 100% _____

1. How much did you earn from working in 2014? *Alimony or child support payments need not be disclosed unless it is desired to have such payments counted toward total income. \$ _____

2. How much did your spouse earn from working in 2014? \$ _____

3. What is the net worth of your investments? (do not include the house you live in) (current value minus debt) \$ _____

4. Total current balance of cash, checking and savings accounts? \$ _____

5. Are you married/divorced/separated/single? (Circle One) Number of Children: _____

6. Who is paying for this child? _____
7. How many people (including you) live in your household? _____
8. How many people (from the number above) in your household will be college students during the term of this scholarship? _____
9. Do you have children who will receive more than half of their support from you during the term if this scholarship? _____ If so, how many? _____
10. Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support from you, now and through the term of this scholarship? _____
If so, how many? _____
11. Are you currently employed? Yes ___ No ___
12. If yes who is your employer and what is your position? _____
13. How many years have you been in this position? _____
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In 2013 or 2014, did you, receive benefits from the following:

(Please Circle Answer)

Supplemental Security Income? Yes No

Food Stamps? Free or Reduced Price Lunch? Yes No

Temporary Assistance for Needy Families (TANF)? Yes No

Special Supplemental Nutrition Program for Women? Yes No

Infants and Children (WIC)? Yes No

I agree that I have answered all of the above questions honestly and to the best of my ability.

Printed Name: _____

Signature: _____

Date: _____

Return this form via email to info@AustinRowing.org, via fax to (512) 472-0700 or by mail to 74 Trinity St. Austin, TX 78701