

Austin Rowing Club Scholarship Application

ABOUT ARC SCHOLARSHIPS:

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

Scholarships will be awarded for spring (January – May), summer (June – August), and fall (September – December). Application deadlines will be the 15th of the month preceding the start of each season. May 15th for summer applications, August 15th for fall applications and December 15th for spring applications.

Applications will be reviewed by Austin Rowing Club administrative staff. Scholarships are not automatically renewed each season, and everyone must reapply each season for continued scholarship.

SCHOLARSHIP APPLICATION:

Applicant Name:				
Primary Parent/Guardian Nam	e (for minor applicant):			
Secondary Parent/Guardian N	ame (for minor applicant)):		
Home Phone: ()				
Cell Phone: ()				
Work Phone: ()				
Address:			_ Apt #:	
City:	State:	Zip Cod	e:	
Email:				
Scholarship Applying For: Spri	ing Summer	Fall	50%	100%
1. How much did you earn from	n working in 2013? *Alim	ony or child supp	oort payments	need not be disclosed
unless it is desired to have suc	ch payments counted tow	ard total income	. \$	
2. How much did your spouse	earn from working in 201	3? \$		
3. What is the net worth of you	ır investments? (do not in	clude the house	you live in) (c	current value minus
debt) \$				
4. Total current balance of cas	h, checking and savings	accounts? \$		_
5. Are you married/divorced/se	eparated/single? (Circle C	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?
In 2012 or 2013, 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.
I agree that I have answered all of the above questions honestly and to the best of my ability. Printed Name:

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