

SAUGUS HIGH SCHOOL

**Athletics and Co-Curricular Activities
Scholarship Application**

A separate Scholarship Application Form must be completed for each Season

Family Information

Family Name:		
Address:		
Phone Number:		
E-Mail Address:		
*Student(s) covered by this application:		
Name:	Grade	Sport or Activity

**Scholarship Eligibility
Please complete one section**

Scholarship Eligibility – Complete section 1 or 2 based on the eligibility criteria to be considered:

Section 1

Free or Reduced Priced School Meal

If you are receiving a free or reduced price school meal through Saugus Food Service, you are eligible for a full scholarship. Sign section 1, indicating your permission for the Administration to verify your eligibility.

Signature of Parent/Guardian: _____ **Date:** _____

Section 2

Extenuating Circumstances

If you do not qualify in section 1, you may apply for a scholarship based on extenuating circumstances. Fully detail the circumstances that affect your ability to pay the full fee. If necessary, attach additional sheets. Attach a copy of your most recent federal tax form and two most recent paychecks and note the dollar amount of the scholarship you are requesting.

Signature of Parent/Guardian: _____ **Date:** _____

Check one:

Disposition: Approved in full Approved Partially Amount Owed _____ Denied