



Scholarship Application Policy

Fort Lauderdale FC (FTLFC) sets aside funds to provide financial aid to players who need assistance with payment of the registration fees required to play for Fort Lauderdale FC. **Players/Parents must complete the attached application. If there are extenuating circumstances, please include a letter detailing the situation** (additional information may be required.) **The Fort Lauderdale FC board is the only authority to authorize financial aid and/or payment plans outside of the established payment plan options.**

Financial Aid Criteria

Financial Aid will be awarded based on qualification criteria set by the board. Qualification criteria will generally track published Federal poverty guidelines based on gross monthly income and family size. It may include other criteria as determined by the board such as the federal guidelines for the free and reduced lunch program. Qualification will be based on a sliding scale set by the board using the qualification criteria. Awards will be determined by the applicant's level of qualification, the number of qualified applications, and the amount of financial aid funds available.

Financial Aid Awards

Awards will be applied only towards the player annual registration fee and awards will be for a maximum of 80% of that fee. The recipient's family is required to cover the remaining portion of the fee and applicable tournament fees.

Application Process

Application forms will be available on the FTLFC website, www.ftlselect.com. Applications along with all supporting documentation (please see financial aid application for list of documents required), should be submitted by email or in a sealed envelope. The deadline for financial aid applications is **June 17th, 2018**

If financial aid is awarded the initial player registration has to be completed within 48 hours of notification. If the application is denied in full or part, then payment plan information can be reviewed with the family.

*If an application is received after the deadline or a player registers later in the season, the application will still be reviewed. However, the application will be subject to the availability of remaining funds.



Eligibility

To be eligible for financial aid, all applicants and their parents/guardians must sign the FTLFC Scholarship Application which also serves, if Financial Aid is awarded, as the FTLFC Financial Aid Agreement which requires, among other things, that the recipient and their family agree to assist with club events such as volunteering at home games, club events, potential tournaments, camps, clinics, replacing nets on the goals, and other club activities. If parents of financial aid recipients do not meet this requirement (minimum of 15 hours), FTLFC reserves the right to revoke the financial aid or remove training and playing privileges. **If a player receiving financial aid leaves the club prior to the conclusion of the seasonal year, then the financial aid award becomes void and all funds provided for the annual dues must be repaid in full, prior to a release being given to the player in addition to the club's release fee.** The Club Director will be available, as a resource, to the team manager to provide support and assistance in securing compliance with the terms of the Financial Aid Agreement.

Payment Default Policy

Fort Lauderdale FC is a non-profit 501C corporation. Unpaid fees represent funds not available to meet Club obligations. Any player delinquent in payment of their fees by 30 days or more will be notified by the Club and suspended from participating in any Club/Team activities. There will be a \$25 charge for any late payment and the state association may be informed that the player is no longer in good financial standing with FTLFC. There will be a \$30 charge for any checks returned by the bank and the state association may be informed that the player is no longer in good financial standing with FTLFC. Should a player remain in default Fort Lauderdale FC reserves the right to place the player in "bad standing" with any affiliation the player is registered to.



Fort Lauderdale Select FC Scholarship Application

This form is to be completed by a parent or guardian. All information is confidential and will be reviewed only by the Fort Lauderdale FC board.

Childs Name:					
Birth Date: (MM/DD/YYYY)			Current FTLFC team:		
School:			Grade: (as of Fall 2017)		
Soccer Experience:			Number of Years on a FTLFC team:		
Mothers Name:			Fathers Name:		
Address:			Address: (if different)		
City:	State:	Zip:	City:	State:	Zip:
Home Phone:			Cell Phone:		
Email:					
Email 2					
Parents Marital Status:					
Name and Address of Employer(s):		Job Title(s):		Yearly Gross Income :	
Names of Siblings:		Age:		FTLFC Team:	
What volunteer duties have you agreed to assume for your team?:					
<input type="radio"/> Fundraising Coordinator		<input type="radio"/> Fundraising Coordinator		<input type="radio"/> Treasurer	
<input type="radio"/> Tournament Rep		<input type="radio"/> Manager		<input type="radio"/> Other _____	
What volunteer duties are you willing to assume for the club?:					
<input type="radio"/> Fundraising Committee		<input type="radio"/> Fields			
<input type="radio"/> Events		<input type="radio"/> Other _____			
Amount or Percentage of Financial Aid requested:					
Payment structure:					



Please detail any information that might assist us as we review your financial aid request:

The Fort Lauderdale FC Board of Directors reserves the right to request income verification before completing its reviews and taking action on any financial aid request. Information obtained from this application and/or the income verification process shall remain confidential and will be reviewed only by the Fort Lauderdale FC Board of Directors.

- Required Documentation - Proof of Income. Please attach:
- **a copy of your 2017 Income Tax Return, IRS Form 1040 (first 2 pages)**
 - **a copy of the Income tax return for self employed, Schedule C (if applicable)**
 - **copies of pay stubs or other income verification for all sources of income for at least one full current month**
 - **verification of Medicare or Food Stamps eligibility (if applicable)**

I understand that parent participation in fundraisers and volunteering for team duties is mandatory and I agree to help with team and club fund raising activities. I understand that I will be responsible for all other expenses not covered by the Scholarship. I affirm that all the information given in this application is true and correct.

Parents Signature:	Date:
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For Fort Lauderdale FC Board of Directors Use only

Application received by:	Date:
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Coaches/Team Managers Comments:

Board of Directors Recommendation:

Name of Board Member present:

Date of Board of Directors decision: