



INSTRUCTIONS FOR COMPLETING SCHOLARSHIP VOUCHER REQUEST FORM

The Department offers a scholarship program to Fauquier County residents (ages 0 – 17) who participate in recreational programs sponsored by non-profit organizations. To apply for a Scholarship Voucher please seek assistance as follows:

Procedure 1:

The Fauquier County Parks and Recreation Department offers a voucher system for community programs that meet certain criteria. Each scholarship voucher request is subject to final approval verification through the Department of Social Services. If you already receive qualifying services through the Department of Social Services (DSS), go directly to DSS and ask for a Scholarship Voucher. The DSS staff can provide clients with a Scholarship Voucher immediately, without requiring you to complete additional paperwork. A Scholarship Voucher should be accepted by most organizations in the County as payment for participation.

Procedure 2:

The Department accepts requests for Scholarship Voucher Request Forms from families who do not wish to work through DSS but qualify under the current monthly gross income guidelines established by DSS.

The form can be accessed via the Parks and Recreation website:

<http://www.fauquiercounty.gov/government/departments-h-z/parks-and-recreation/forms>. Select “Forms” from the menu on the left side of the page. If internet access is unavailable, go to a Regional Parks and Recreation office to obtain a copy of the form.

Those requesting vouchers must:

1. Complete all of the following information on the Scholarship Voucher Request Form:
 - a) Requestor Name – name of the person completing the Voucher Request
 - b) Child Name – name of the child using the voucher
 - c) Child Age – age of the child using the voucher
 - d) Address and phone number
 - e) Number in Household – all members living in the household including parents
 - f) Organization and Program Name and Dates/Season – e.g. Organization and Program Name: Fauquier Youth Football or Fauquier Youth Football Cheerleading Season/ Dates: fall 2018
 - g) Sponsoring organization – e.g. Fauquier County Soccer or Warrenton Youth Sports
 - h) Confirm eligibility per Gross Income Guidelines
2. Attach a copy of previous year’s Federal Tax Return. This is required to be submitted with the Scholarship Voucher Request Form. Mark out social security number on all documents.
3. Certify all information is complete and true by signing the form.

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4. Take or mail the form to the nearest Regional Parks and Recreation office for review and approval. The request will be reviewed by the Regional Superintendent when time permits. To ensure confidentiality the form and tax information should be delivered in a sealed envelope or requestor should ask for an envelope and seal the information in the envelope before handing it to the office attendant. The information will be locked in a safe until it is reviewed and kept in a locked cabinet after review and approval.
5. If the request is approved, the signed voucher will be handed or mailed to the requestor with instructions for submitting it to the sponsoring organization. If the voucher is not approved the requestor will be notified and given a reason for rejection.
6. If rejected but there are extenuating circumstances, the requestor may ask the Regional office to forward the Scholarship Voucher Request Form and tax return to the Parks and Recreation Administrative Office. The requestor must then submit a letter to the Parks and Recreation Administrative Office explaining the extenuating circumstances (see Procedure 3).

Procedure 3

For applicants who do not qualify for the voucher program as outlined above due to extenuating circumstances:

1. You must submit a letter of explanation to the Department of Parks and Recreation Administrative Office.
2. Bring a completed Scholarship Voucher Request Form to the Parks and Recreation Administrative office. This is required for all applicants applying under special circumstances. (If requestor has previously asked a Regional office to forward this information to the Administrative Office, disregard).
3. Attach a copy of previous year's Federal Tax Return. This is required for all applicants applying under special circumstances. Mark out social security number on all documents. (If requestor has previously asked a Regional office to forward this information to the Administrative Office, disregard).
4. Certify all information is complete and true by signing the form. (If requestor has previously asked a Regional office to forward this information to the Administrative Office, disregard).
5. Once the request is submitted to the Parks and Recreation Administrative Office, review and determination of approval will be made by the Director when time permits. To ensure confidentiality the form and tax information should be delivered in a sealed envelope or requestor should ask for an envelope and seal the information in the envelope before handing it to the office attendant. The information will be placed in a locked cabinet until it is reviewed and kept in a locked cabinet after review and approval.
6. After review, if approved, the signed voucher will be sent to the requestor with instructions for submitting it to the sponsoring organization. If the voucher is not approved the requestor will be notified and given a reason for rejection.



FY2018 SCHOLARSHIP VOUCHER REQUEST
(Voucher Limit: \$150 per child per year per program)

Requestor Name: _____

Child Name: _____ Age: _____

Address: _____ City _____ State _____ Zip _____

Phone: _____ Email (if applicable): _____

Number in Household _____

Program Name: _____ Season/Dates: _____

Sponsoring Organization: _____

GROSS INCOME GUIDELINES

All information is subject to final approval verification through the Department of Social Services.

HOUSEHOLD SIZE	INCOME LIMITS (monthly)	INCOME LIMITS (annual)
1	\$2,010	\$24,120
2	\$2,707	\$32,480
3	\$3,404	\$40,840
4	\$4,100	\$49,200
5	\$4,797	\$57,560
6	\$5,494	\$65,920
7	\$6,190	\$74,280
8	\$6,887	\$82,640
each additional	\$697	\$8,364

Verification to be determined by family's previous year's Federal Tax Return. All tax information will remain confidential and will be secured at all times. Requests will be sent to the Parks & Recreation Administrative Office for review if special or extenuating circumstances are cited.

I certify that the information I have provided and attached is complete and true.

Signature:

Name: _____ Date: _____

This voucher may only be used for reimbursement by organizations and programs approved by Fauquier Co. Parks and Recreation Dept.

For Internal Processing

I have reviewed the income information provided and approve the voucher request for the above mentioned individual for the program specified.

Approved by: _____ Date: _____ Voucher # _____
 (Regional Superintendent/Admin Staff)