



RED STAR SOCCER

2012/2013 SCHOLARSHIP POLICY AND APPLICATION

Policy and Purpose: Red Star recognizes the importance of inclusivity to all players, regardless of socio-economic conditions. Accordingly, the academy has developed this Scholarship Policy to increase the availability of its services to interested and qualified members. Red Star offers discounted program fees to players/parents able to pay 20% to 50% of standard fees, depending on their individual financial situation. Such scholarships are awarded on a case-by-case basis and are subject to availability of funds. Red Star will use best efforts to provide scholarships to each family in need. However, submission of this application does not guarantee approval for scholarship status or level of assistance received. Scholarship recipients agree to actively participate in Red Star fundraising activities and in activities that require volunteer support. Details of volunteerism from scholarship members are to be determined jointly between applicant and a representative of the Red Star Scholarship Committee.

Please Note: Uniform kit expenses are not eligible for scholarship assistance. Payment for the standard Red Star uniform kit is due upon initial registration or in conjunction with submission of this application.

Directions: Submit one scholarship application per player per season. Specify the scholarship award % you seek from table below. Submit completed form to Red Star Soccer, ATTN: Scholarship Committee, 248 Walker Dr. #8, Mountain View, CA. 94043. Determination of scholarship eligibility and award levels are the sole discretion of Red Star's Scholarship Committee. All information submitted is held in confidence. You may also submit a one page narrative letter in support of your application.

Program	Uniform Kit	All Inclusive Seasonal Fee	Scholarship Level			
			80% Award	70% Award	60% Award	50% Award
Parent Responsibility In addition to Uniform Cost						
Youth Competitive U8-U11	\$175	\$882	\$176.4	264.6	\$352.8	\$441

Player: _____ Age Group: _____ % Request: _____

Home Phone: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Mother/Guardian: _____ Home phone / Mobile: _____

Email: _____ Occupation: _____

Father/Guardian: _____ Home phone / Mobile: _____

Email: _____ Occupation: _____

of other children and ages: _____

Date: _____ Parent/Guardian signature: _____

A copy of previous year's U.S. Federal Tax Return (Form 1040) - First and Last Page Only must accompany this Request for Scholarship. Please black out any Social Security Numbers before sending:

Office Use Only: Approved: _____ Denied: _____ % Request Granted: _____ Balance: _____

RSS Treasurer: _____ Date: _____ Payoff Months: _____ 1 _____ 2 _____ 3 _____ 4