



## **Sports Scholarship for Athletes with financial need**

### **Application Introduction**

A.C. Miami offers Scholarship for the Soccer and Track & Field Clinics programs based on demonstrated need. The A.C. Miami's Selection Committee reviews and approves all applications. All application information is kept 100% confidential. You will be notified by the A.C. Miami's Selection Committee if your application has been approved.

### **1. Scholarship Requirements**

**For “families/residents with financial need” we provide Discounted or Full Scholarships.** Requirements will be the following:

**1)** Apply for the Scholarship, including the applicant's economical classifications (based on annual household income). Comment: application can be presented at any point of the year, no deadline date.

There are two divisions for the economical classifications.

A) Families/residents with **less than \$18,000.00** annual household income can get Scholarship for the 100% of membership fee.

B) Families/residents with **less than \$28,000.00** annual household income can get Scholarship for the 50% of membership fee.

C) Families/residents with **less than \$50,000.00** annual household income can get Scholarship for the 15% of membership fee.

**2)** Meet the educational, behavioral and moral criteria at the date of submission, and until the end of the scholarship period. **Scholarship criteria to be met at acceptance and throughout participation:**

#### **Educational criteria:**

- Uphold letter grade of C or above, submit report cards bi-yearly.
- Comply with school and A.C. Miami (attend a minimum of 80% of scheduled practices and games) attendance regulations.
- No record of suspension and/or expulsion. Provide official documentation from educational facility.

**Behavioral criteria:**

- Treat all A.C. Miami staff members with respect and courtesy.
- Follow absentee and tardiness regulations. Members who are late and/or absent more than 5 times in a period of the scholarship (6 months), without 24 hour prior notification, will be dismissed from the program.
- Abide by A.C. Miami's philosophy regarding cooperation and teamwork.
- Maintain courteousness with surrounding community.

**Moral criteria:**

- Exhibit ethical conduct in and outside of A.C. Miami activities.
- Commit time, dedication and effort to the wellbeing of oneself and the team.
- Show consideration and respect for any and all competitor teams.

**3)** The applicant must be a resident of Miami-Dade County, and from age 3 to 25 years old at the date of submission.

## **2. Comments**

Scholarship priority will be given to eligible children meeting one or more of the criteria below:

- 1. Member of a multi-child family, and/or living in a single parent home.*
- 2. Written recommendation by school representatives, social workers, youth community center workers, or other social services representatives.*
- 3. Special consideration will be given to those applicants that indicate that they are willing to serve as a volunteer on their application.*

Actions if the grants are violated:

- There will be a two strike dismissal policy for minor infractions on the qualifications guidelines. If any of the program policies are violated, the action will be reviewed by the Board for a determination of the type of infraction and remedy. The member will have to cure the infraction and will be placed on a 6 month probationary period.
- For major infractions, A.C. has a zero tolerance policy where the member will be expelled from the program.



# Youth Sports Scholarship Application Form

## REQUIREMENT CHECKLIST FOR ELIGIBILITY

Application must be completed by a **parent, guardian, or head of household**, with all requested information provided. Incomplete applications will not be considered.

Please checkmark the squares ☒

- ☐ Applicant must submit **previous year's tax return** with application.
- ☐ Applicants **MUST** have completed **annual registration payment**.
- ☐ Applicant must submit copy of student's last report card.
- ☐ No record of suspension and/or expulsion. Provide official documentation from educational facility.

Please complete the following information, one application per athlete!

Athlete's name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sport: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

**1. Parent/Guardian's name:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

Parent/Guardian's phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**2. Parent/Guardian's name:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

Parent/Guardian's phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Total Household Annual Income: \$** \_\_\_\_\_  
(please provide recent Tax Return!)

Own Home (Circle) Yes No

Athlete lives with: ☐ Both Parents; ☐ Single Parent; ☐ Other

Would you be willing to serve as a Volunteer: ☐ Team Manager (collecting coach's & referee's fee); ☐ Asst. Coach; ☐ Sport Program Assistant; ☐ Team's Media manager

School Athlete Attends: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Room Teacher's Name: \_\_\_\_\_ School Phone: \_\_\_\_\_

Has the athlete ever received A.C. Miami Scholarship/Financial Aid? ☐ Yes ☐ No ; If Yes,

Year \_\_\_\_\_ Sport \_\_\_\_\_



**Consent to release information** I understand that my signature authorizes the A.C. Miami to obtain verification of all information on this application and that additional information may be necessary for approval of this application.

**Parent's Understanding:** Filling out a scholarship application does not guarantee that my child will be approved. The A.C. Miami will take all applications into consideration and will let applicants know their status as soon as possible.

**Parents Commitment:** I understand that if my child receives scholarship dollars that I will be asked to support my child in attending practices, games and clinics that the coach asks the team to participate in. I will support Athletic Club Miami by participating in fundraisers and club events when ever possible. I will volunteer my time to the team or club when possible.

Please list below talents or interest you have that might be useful to the club or team (accounting, landscaping, irrigation, teaching, marketing, event planning, etc.)

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I certify that all of the information on this form is true and correct and that **I will comply with each of the Criteria items listed on the Application Introductions.**

_____ Parent 1 Printed Name	_____ Parent 2 Printed Name	_____ Guardian's name (if any)
_____ Parent 1 Signature	_____ Parent 2 Signature	_____ Guardian Signature (if any)

Date\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

### OFFICE/COMMITTEE USE ONLY

Application received by A.C. Miami Selection Committee on \_\_\_\_/\_\_\_\_/ \_\_\_\_

Athletic Club Miami Selection Committee Approval:

Scholarship level (A/B/C/other): \_\_\_\_\_

Comment: \_\_\_\_\_

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_____ <i>Chairperson's printed name</i>	_____ <i>Committee member's printed name</i>	_____ <i>Committee member's printed name</i>
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_____ <i>Chairperson's signature</i>	_____ <i>Committee member's signature</i>	_____ <i>Committee member's signature</i>
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Date:_____/____/ ____	Date:_____/____/ ____	Date:_____/____/ ____
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