

KENAI PENINSULA HOCKEY ASSOCIATION

SCHOLARSHIP APPLICATION FORM

Application deadline is at time of Registration, but no later than October 31st.

(One child per application)

Child Applicant Name:		
M/F:	Age:	Hockey Level:
Parent or Legal Guardian Name:		
Home Address:		
Home Phone:	Cell Phone:	Email:
Primary Employer:		Work Phone:

Please list all legal guardians in the household.

Name	Annual Income: \$	
Name	Annual Income: \$	Household Income: \$

Please list all other children in your household.

Name	Age	Plays hockey?	Level

Note: Application deadline is at time of registration, but no later than October 31st.

<p>KPHA Scholarships are considered and granted based on the following criteria:</p> <ul style="list-style-type: none"> *Availability of funds *Financial need of parent(s) and child applicant *Special personal circumstances *Number of years in association *No balance from prior year's fees 	<p>Please forward your completed application and information to:</p> <p>Kenai Peninsula Hockey Association Confidential Attn: Mike Wesson, Treasurer 405 Overland Ste. 104 Kenai, AK 99611 OR email to: gowesson1@gmail.com & kpha.president@gmail.com</p>
---	---

The KPHA Scholarship program in accordance with the KPHA mission is designed to provide an affordable, high-quality hockey experience to those who have financial need. This program is not meant to be a handout but rather a financial assistance program made available to those who meet the qualifying criteria and are committed to this organization.

TERMS AND CONDITIONS: Recipients of the scholarship will be required to complete volunteer hours based on the level of assistance they receive. For AA (Tier II) level scholarship, 50+ hours will be required. For A level scholarship, 40+ hours will be required. For B level scholarship, 30+ hours will be required. For those with multiple players receiving scholarships, you will be required to complete the higher amount of hours and 10+ additional hours per player. These volunteer hours can be done within your own team for games (clock, score, penalty box, etc.). But many other opportunities are available throughout the season to help you complete these hours. You will be required to turn in a form of your completed hours. If the minimum amount of hours are not complete by the end of the last KPHA hosted event for the season, you will be charged for the remaining hours. Please contact our Volunteer Coordinator, Martin Marlin at heavyhit21@gmail.com to learn of opportunities to help you meet your volunteer requirements.

I understand that I am responsible for submitting the following information in order to apply and be considered for a scholarship:

- Completed Scholarship Application Form
- Copy of most recent income tax statement filed by parent(s) of child applicant.
- Explanation of any special personal circumstances.
- Description of parent(s) availability and commitment to volunteer.

I hereby certify that the information on this form is accurate and I understand that the Kenai Peninsula Hockey Association Board may verify this information and I give authorization to KPHA Executive Board members to verify the information contained within the application. Deliberate misrepresentation may result in termination of further financial assistance. I understand that any financial assistance is granted through a confidential board process based on the outlined criteria, and there is no guarantee made of the granting nor amount of scholarship. I understand and agree to abide by KPHA terms and conditions of accepting the scholarship. I understand that continued financial support may be terminated if these terms and conditions are not met. I also understand that KPHA's scholarships are awarded seasonally, and that I must apply each season for scholarship consideration.

Parent or Legal Guardian Name:	
Parent or Legal Guardian Signature:	Date:

KPHA Executive Board Use Only

Date Application Package Received:	Date Forwarded to Board:
Received by:	Date Reviewed by Board:
Application Package Complete or Incomplete:	Application Approved or Denied:
Missing Information:	Scholarship % or Amount Granted:
Notes:	Date Parent(s) Applicant Notified: