



MONROVIA PARKS WILDERNESS AND RECREATION FOUNDATION YOUTH SCHOLARSHIP PROGRAM APPLICATION

MPWR is committed to providing all youth access to parks and recreation programs. One way to achieve this goal is through a Scholarship Program designed to remove any financial barriers that may prevent a family from participating in our programs. Through this partnership, youth who live in Monrovia or attend Monrovia schools and are 17 or younger may apply for funding to cover their registration fees for City of Monrovia sponsored programs. Each family is eligible for up to \$500 per year with a cap of \$250 per child per year. Some exceptions may apply.

To learn more about the program, please contact staff at the Monrovia Community Center by calling (626) 256-8246.





MONROVIA PARKS WILDERNESS AND RECREATION FOUNDATION YOUTH SCHOLARSHIP PROGRAM APPLICATION

Name of Parent or Guardian: _____ Age: _____

Home Address: _____

Phone Number: _____ Email Address: _____

Gender: _____ Race: _____

INCOME QUALIFICATION

Please select one form of income qualification.

Please note income qualification levels are subject to change. These figures are based on the 2022 California Department of Housing and Community Development (HCD) County of Los Angeles Low Income Levels.

____ Cal Fresh Enrollment

____ Feed or Reduced Lunch Enrollment

____ Medicaid / Medi-Cal

____ Public Housing Program

____ SSI / SSD

____ WIC

____ Annual income level qualifies using table below

Household Size	Annual Income
1	\$70,650
2	\$80,750
3	\$90,850
4	\$100,900
5	\$109,000
6	\$117,050
7	\$125,150
8	\$133,200

FOR OFFICE USE ONLY

Staff Review: _____

Awarded Amount: _____

Document Verification: _____

Funds Distributed to Account: _____

Approved by: _____

Reason Denied: _____

YOUTH PARTICIPANTS

Youth No. 1

Name: _____ Age: _____

Gender: _____ Race: _____

School: _____

Requested Program / Class: _____ Amount: _____

Youth No. 2

Name: _____ Age: _____

School: _____

Gender: _____ Race: _____

Requested Program / Class: _____ Amount: _____

Youth No. 3

Name: _____ Age: _____

School: _____

Gender: _____ Race: _____

Requested Program / Class: _____ Amount: _____

Youth No. 4

Name: _____ Age: _____

School: _____

Gender: _____ Race: _____

Requested Program / Class: _____ Amount: _____