



CITY OF DIXON
RECREATION DIVISION
PUBLIC WORKS DEPARTMENT

Recreation Activity Scholarship Program
Policies and Procedures

The City of Dixon Recreation Scholarship Program was established so that every **resident** child could have an opportunity to participate in a supervised recreation program and receive financial assistance towards fee programs offered by the Recreation Division of the Public Works Department. In an effort to provide affordable programs, income eligibility guidelines have been established to assist lower income resident families. Eligible participants may receive a 75% discount up to \$100.00 per child on programs upon completion and approval of an APPLICATION FOR REDUCED PROGRAM FEES FOR DIXON RESIDENTS. The Recreation Manager will be responsible for the management of the scholarship program. Appeals of eligibility will be heard and resolved by the Public Works Director.

APPLICATION PROCEDURE

Complete the attached APPLICATION FOR REDUCED PROGRAM FEES FOR DIXON RESIDENTS, provide verification, sign and return it to the City of Dixon, Recreation Division, 600 East A Street, Dixon, CA 95620, during normal business hours. The application will not be reviewed or approved unless it contains all of the information requested and is signed by an eligible adult member of the household. Applications will be reviewed and eligibility will typically be determined within three weeks or less. Applicants will be contacted of eligibility. Eligible applicants may register for recreation programs after approval at the reduced percentage.

If you have questions or need assistance in completing the application, please contact the Recreation staff at 600 East A Street, Dixon, CA 95620, (707)678-7022. The Recreation staff will inform each family when the application has been approved or denied.

Each child/family must reapply each year. Individuals who qualify one year may not necessarily qualify the next year if the family's total household income or situation changes.

DETERMINATION OF ELIGIBILITY

If the total household income is the same or less than the amounts on the income scale below, children in the family may be eligible for a 75% discount on selected recreation programs offered by the City. Household means a group of related, or non-related, individuals living as one economic unit and sharing living expenses, including rent, clothes, food, medical and utility bills. For an applicant to be eligible, they must be listed as a dependent on the requesting parent/guardian's tax forms.

INCOME ELIGIBILITY GUIDELINES:

| <u>HOUSEHOLD SIZE</u> | <u>ANNUAL INCOME</u> |
|-----------------------|----------------------|
| 2 | \$38,850 |
| 3 | \$43,700 |
| 4 | \$48,550 |
| 5 | \$52,450 |
| 6 | \$56,350 |
| 7 | \$60,250 |
| 8 | \$64,100 |

INCOME VERIFICATION

Applications must be accompanied by copies of all of the following:

1. Valid driver's license or identification card of an adult member of the household.
2. A Dixon utility bill (that is, PG & E, water, AT&T or Recology Dixon).
3. First page of a current 1040 Federal income tax return form and supporting W-2's or other tax form that verifies annual total household income.

The City of Dixon, at its sole discretion, may accept other forms of income verification. All applications and attachments are filed with the Recreation Division of the Public Works Department for the exclusive purpose of determining scholarship eligibility.

PROGRAMS NOT ELIGIBLE FOR ASSISTANCE

Programs directly offered by the Recreation Division of the Public Works Department will be offered at a 75% discount to children of resident families that complete the APPLICATION FOR REDUCED PROGRAM FEES FOR DIXON RESIDENTS and are eligible for the reduced fees.

The City reserves the right to limit eligibility.

The following programs will **not** be eligible for the discount program:

1. Recreational Swim.
2. Daily Fee Activities.
3. Other programs as determined solely by the City of Dixon.
4. Recreation programs not operated by the City of Dixon.

NONDISCRIMINATION

Children that receive reduced program fees will be treated in the same manner as those children that pay full price for the same service. No child or family will be discriminated against because of race, sex, color, national origin, age or disability. Parents/Guardians will be asked to present a valid driver's license or identification card when registering for approved activities.

CONFIDENTIALITY

The information provided on the APPLICATION FOR REDUCED PROGRAM FEES FOR DIXON RESIDENTS and supporting documentation will be used only to decide if the child is eligible to receive reduced program fees.

CITY OF DIXON
PUBLIC WORKS DEPARTMENT
RECREATION DIVISION



Application for Reduced Program Fees for Dixon Residents

Complete Application and Return to:
City of Dixon, Recreation Division
600 East A Street
Dixon, CA 95620

| For Department Use Only: | |
|----------------------------|-------------------------|
| Household Size _____ | |
| Eligibility Determination: | |
| Approved by _____ | Entered in System _____ |
| Determining Official _____ | Date _____ |

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name _____ Home Phone _____ Work Phone _____
Mailing Address _____ City _____ State _____ Zip Code _____

CHILD INFORMATION

| <u>Last Name, First Name</u> | <u>Age</u> | <u>Grade</u> | <u>Last Name, First Name</u> | <u>Age</u> | <u>Grade</u> |
|------------------------------|------------|--------------|------------------------------|------------|--------------|
| 1. | | | 5. | | |
| 2. | | | 6. | | |
| 3. | | | 7. | | |
| 4. | | | 8. | | |

HOUSEHOLD MEMBERS AND ANNUAL INCOME

| <u>List All Adult Household Members</u> | |
|---|----|
| 1. | 3. |
| 2. | 4. |

| <u>Indicate the Amount of ANNUAL INCOME</u> |
|--|
| <p>Total Household Annual Income (Including gross earnings from work, pensions, retirement, social security welfare benefits, child support, alimony, payments or other income.) A copy of the first page of a current 1040 Federal income tax return form and supporting W-2's or other tax form that verifies annual total household income are required.</p> <p style="text-align: right;">\$ _____</p> |

| | |
|--|---------------|
| Parent/Guardian will be asked to present appropriate documentation when registering for approved activities. | |
| I certify that all of the above information is true and correct and that all income is reported. | |
| _____ Signature of adult household member completing this form | _____ Date |