

SCHOLARSHIP GRANT APPLICATION

2025 Household Application for Southern Lakes Parks & Recreation Scholarship Grant.
Complete one application per household. \$150 granted per household per year.
Families with 4 or more people may receive \$50 per family member

STEP 1: List ALL Household members who are infants, children, and students.

Attach page for additional names if more space is needed.

Definition of Household Member:

Anyone who is living with you and shares income and expenses, even if not related.

PLEASE PRINT

	Child's First Name	MI	Child's Last Name	Student YES NO	School	Grade	Foster Child	Homeless, Migrant, Runaway
1)								
2)								
3)								
4)								
5)								

Step 2 Report income for all Adult Household members

List all Adult Household Members (including yourself) not listed in STEP 1 even if they do not receive income. For each Adult Household Member listed, if they do receive income, report total gross income (before taxes) for each source in whole dollars (no cents) only. If they do not receive income from any source, write "0". If you enter "0" or leave any fields blank, you are certifying (promising) that there is no income to report.

PLEASE PRINT

	Name of Adult Household Members (First and Last)	Earnings from Work (Monthly)	Public Assistance/ Child Support/ Alimony (Monthly)	Pensions, Retirement/ All Other Income (Monthly)
1)		\$	\$	\$
2)		\$	\$	\$
3)		\$	\$	\$
4)		\$	\$	\$
5)		\$	\$	\$

Total Household Members
(Children and Adults): _____

STEP 3: Contact information and adult signature. Mail Completed form to Southern Lakes Parks & Recreation 150 S. Leroy St, Fenton, MI 48430

"I certify (promise) that all information on this application is true and that all income is reported. I understand that this information is given in connection with the receipt of Federal Funds, and that school officials may verify (check) information. I am aware that if I purposely give false information, my children may lose meal benefits, and I may be prosecuted under applicable state and federal laws."

 Street Address (if available) Apt. # City State Zip Daytime phone & email (optional)

 Printed name of adult signing form Signature of adult Today's date

2025 HOUSEHOLD APPLICATION FOR SLPR SCHOLARSHIP GRANT (CONTINUED)

Scholarship eligibility income guidelines:

Household Size	Income	PROOF OF INCOME:
1 Person	\$34,250	Must provide a copy of 2023 or 2024 Federal Income Tax Return
2 Person	\$39,150	
3 Person	\$44,050	
4 Person	\$48,900	
5 Person	\$52,850	
6 Person	\$56,750	
7 Person	\$60,650	
8 Person	\$64,550	

RESIDENCY DEFINED: To qualify you must reside within the City of Fenton, City of Linden, or Fenton Township. SLPR is funded through property taxes collected in these areas. Residency is determined where property taxes are paid. Non-Residents may still apply and SLPR will coordinate with your school district for a potential scholarship.

PROOF OF SLPR DISTRICT RESIDENCY:

Must provide items as proof of residency:

*Property Tax Statement

*Drivers' License

*A utility bill: water, electric, gas, phone or internet service



DO NOT FILL OUT: for administrative use only

Residency:	School District:	Yearly Income:	Household Size:
Determining Official's Signature & Date		Confirming Official's Signature & Date	
		Scholarship Approved: YES NO	