



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# WE'RE HERE TO HELP YOU

## Scholarship Application

### THE ESSENCE OF THE Y

The Y is a powerful association of men, women and children of all ages and from all walks of life joined together by a shared passion: to strengthen the foundations of our community. At the Switzerland County YMCA, we seek to be a positive change in our community. Together with people like you, we nurture the potential of kids, help people understand and improve their health and provide opportunities to give back and support neighbors. Our Y focuses on three areas: youth development-nurturing the potential of every child and teen, healthy living-improving our community's health and well-being, and social responsibility-giving back and providing support to our neighbors to help positive changes occur in our community. With a commitment to nurturing the potential of kids, promoting healthy living and fostering a sense of social responsibility, we ensure that every individual has access to the essentials needed to learn, grow, and thrive. Join the Y today and become apart of something more.

### EVERYONE IS WELCOME

With a commitment to nurturing the potential of kids, promoting healthy living and fostering a sense of social responsibility, the Y ensures that every individual has access to the essentials needed to learn, grow and thrive. The YMCA welcomes all who wish to participate and believes that no one should be denied access to the Y based on their ability to pay. Through our **Scholarship Program**, the Switzerland County YMCA provides assistance to youth, adults and families based on individual needs and circumstances. Every YMCA member receives the same membership benefits, regardless of whether or not they receive a scholarship. The Y offers scholarships on memberships and child care programs for members. A scholarship reduces the fees, but it does not eliminate them.

### COMMITTED TO OUR COMMUNITY

Determining assistance amounts is handled by the YMCA in a fair and consistent manner. Every YMCA member receives the same membership benefits, regardless of whether or not they receive a scholarship. YMCA members can feel confident knowing that they are a part of an organization that cares greatly for the well-being of all people, and is committed to youth development, healthy living and social responsibility.

A Scholarship reduces membership fees; it does not eliminate them.

Scholarships will be not be processed until we receive all required documents.

All People Helping People Scholarships will be granted for one year.

The YMCA requests that individuals and families reapply every 12 months, with updated documentation.

Membership fees are subject to change when you reapply.

If you do not reapply at the time requested, your membership will then draft at the regular rate of membership.

Please contact 812-427-9622 if you have any questions.



#### SWITZERLAND COUNTY YMCA

1114 West Main St Vevay, IN 47043

P 812 427 9622 F 812 427 0258

E switzerlandymca@yahoo.com W www.switzymca.org



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## **Scholarship Information**

### **The Heart of the YMCA's Mission:**

"To put Christian principles into practice through programs that build a healthy spirit, mind, and body for all."

Our mission is to reach out and serve the all the members of our communities', and not decimate on any level.

The Switzerland County YMCA offers a scholarship program to help reach more members of our community, because the Y is a community based charity and believes that is should be available to everyone. Our scholarships are offered based on the household size and household income. We want all people to be involved with the programs and services the Y has to offer.

YMCA members can feel great knowing that they are involved in an organization that cares deeply for the health and well-being of our community and is committed to building strong kids, strong families, and strong communities.

### **Annual Campaign:**

Our scholarships are made available from the generosity of our members, donors, and community. Annually the YMCA raises money for scholarships through Annual Campaign.

### **How to apply for assistance:**

- Complete the scholarship application attached to this form
- Provide verification of income
- Return completed application and all documents to the Switzerland County YMCA

### **Why does the YMCA need my financial information?:**

We ask for verification of income through documents so that we can use that information to award scholarships in a fair and consistent manner. This process is used to ensure that everyone receives equal consideration and so that the YMCA is able to serve as many individuals as possible.

### **Scholarship Sliding Scale:**

Our scholarships are given based off of family household income and household size. When reviewing our applications we use a sliding scale that takes both of these factors into consideration. We then find the corresponding percentage and reward that as our scholarship.

The table below is based off of a family of four  
\*(please note the income scale changes with the size of the family).

Percentage of Scholarship Rewarded	Annual Household Income (family of 4)
70%	\$0-\$19,999
60%	\$20,000-\$24,999
50%	\$25,000-\$27,999
40%	\$28,000-\$30,999
20%	\$31,000-\$33,999
10%	\$34,000-\$36,999



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Financial Assistance Application

**APPLICANT INFORMATION**

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

County: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Number of family members living in household: \_\_\_\_\_

Type of Membership Requested: \_\_\_\_\_

Monthly Amount:		Proof of Income <b>MUST</b> be Attached
Employment	\$	2 Most recent paycheck stubs or statement signed by Employer with gross wages, or <i>Work One</i> documentation
Child Support	\$	Checks, printout from the child support office
Disability, Veteran's Compensation, Social Security or SSI	\$	Award letters or bank statements showing direct deposits
Unemployment Compensation	\$	Unemployment statement or weekly benefit computer print-out
Self Employment	\$	Most recent Federal Tax Return
Food Support	\$	Documentation from County or Disbursement History
Housing Assistance	\$	Official Document from agency or person providing support
Other	\$	Any other form of income you may receive
<b>Total Gross Monthly Income</b>	<b>\$</b>	<b>Are all required documents attached: ___ yes ___ no</b> <b>Application cannot be processed without all documents.</b>

**THIS APPLICATION MUST BE RENEWED EVERY 12 MONTHS**

I certify that the above information is true and complete to the best of my knowledge, and that I do not have additional income not represented above. I agree, if necessary, to send additional information and documentation to support the above statements. I understand that sponsorship assistance is based on need. In the event that I or my children must cancel our participation, I will contact the YMCA immediately so sponsorship can be provided to others. I understand that if I falsify any of the above information, I will not be eligible for assistance now and/or in the future.

\_\_\_\_\_  
Signature of person completing this form Date

**Office Use:** Date evaluated: \_\_\_\_\_ Approved by: \_\_\_\_\_  
Subsidy Award: \_\_\_\_\_%  
Join Fee Amount: \_\_\_\_\_ Monthly Amount: \_\_\_\_\_