

## **DECATUR FAMILY YMCA**

# YCARES SCHOLARSHIP – INCOME VERIFICATION GUIDELINES

Income must be provided for each adult on the membership, children may be counted as dependents until age 24, but parent/guardian must maintain proof of dependency.

# INCOME AND DEPENDENT VERIFICATION

Provide a copy of the most recent federal tax return document OR Department of Human Services (DHS) award letter that indicates gross earned income and proof of dependents.

#### AND

Provide verification on all applicable sources of income and provide documentation for any other assistance you receive:

- 1. 2 Pay Stubs for each working adult that are current and consecutive
- 2. Pensions or Retirement
- 3. Bank statements that show income source
- 4. Social Security Income (SSI) or Social Security Disability Income (SSDI)
- 5. Unemployment Statement
- 6. Cash benefit Government Assitance: TANF, grants, FIP
- 7. Child Support Income & Alimony payments/deductions
- 8. Student loan living expense portion

If there is not current income verification, zero income, negative income, or not approved documentation of income, a financial assistance award cannot be processed.

# **PROOF OF DEPENDENT(S)**

### Provide a minimum of 1 document of dependent verificiation:

- 1. Dependents claimed on approved 1040 federal tax return documents
- 2. Social Security Income (SSI) or Social Security Disability Income (SSDI): benefit will be addressed to the parent but the child's name will be listed on the same document
- 3. Government Assistance Documentation Listing Household Size
- 4. Report card from school with parent or guardian and child's name present
- 5. Custody Agreement legal documentation
- 6. Dependents between the ages of 18 and 23 must provide a college schedule verifying enrollment in at least 12 credit hours.



## **DECATUR FAMILY YMCA**

# YCARES SCHOLARSHIP APPLICATION

The Decatur Family YMCA stives to make our health, wellness, and family building programs available for all people regardless of financial status. All scholarships are based on family size and income and awarded on a sliding scale.

Proof of income is required for all adults in household. Proof of dependency is required of all children to be on membership. Financially assisted membership must be reviewed on an annual basis.

# **INCOME DOCUMENTATION**

Please complete monthly income if you receive any of the following and provide required documentation:

Income	Adult 1- Monthly	Adult 2 - Monthly	Required Documentation	
Total Gross Wages			Current year's Federal Tax Return and 2 pay stubs that are current and consecutive	
Unemployment			Unemployment statement	
SS/SS Disability			SS/SSI award letter	
Pension/Retirement			Award letter	
Child Support			Award letter or bank statement	
Alimony			Award letter or bank statement	
Government cash benefits (FIP/TANF/Grants)			Award letter	
Other financial support			See income verficiation guidelines for requirements	
Total Monthly Income				
Combined Household ANNUAL Income				

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 Y immediately so sponsorship can be provided to others. I also agree to notify the Decatur Family YMCA if my financial status should change. I understand that fees are subject to change upon renewal. 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		Date	
Scholarship Rate Awarded:	%	Staff Intials	Date