



Adult Integrative Fitness Scholarship Application

Application Status: New Previously applied/not received, Previously applied & received scholarship
 (please write for what program, total previous financial grants given and the dates)

First Name: _____ Middle: _____ Last: _____

Gender: M F Birth Date: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Cell Phone _____ E-mail address: _____

How did you hear about the? FCC office Newspaper Other: _____ (Please be specific)

Please tell us briefly how this scholarship will benefit you and list any special financial or other circumstances causing your need. Please use the back side of this application if you need more room for explanation.

Answers to all questions in this section are for statistical purposes only and used to help secure funding for our programs. Answers are confidential.

Annual Household Income: _____

Are you the beneficiary of any other free or reduced cost social services/programming? (Please list)

Number of Individuals Living in Household: _____

Are you or your spouse a member of the military? Yes No If yes, which branch: _____

I certify that all information on this form is true and correct to the best of my knowledge, and that all income is reported. I understand that this information is being given as a request for financial assistance, and that the Friends of Fallbrook Community Center has the right to verify this information, and that deliberate falsification of information will result in denial of application. By signing this document I understand that should I be awarded a scholarship I may be required to complete a survey and provide a thank you letter at the completion of the program.

I also give consent for photographs in which I may appear to be used in any legal way the Friends of the Fallbrook Community Center (FFCC) may wish to use them. I understand that FFCC has a limited amount of funding available for scholarships, so regardless of qualifications, no applicant is guaranteed any financial assistance. Scholarship awards take many things into consideration and awarding of grants is at the sole discretion of FFCC with no guarantees otherwise.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

New/Renewal: _____ Expiration Date: _____ Processed by: _____
 Approved: ___ Denied: ___