



What benefits do you see in having this scholarship to join the YMCA as a Participant?

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Why are you applying for scholarship assistance?

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Please itemize your monthly income and expense items

INCOME

EXPENSE

Wages salaries & tips	\$ _____	Rent\Mortgage	\$ _____
Unemployment compensation	\$ _____	Utilities	\$ _____
Social Security compensation	\$ _____	Food	\$ _____
Child support	\$ _____	Clothing	\$ _____
Aid to dependent children	\$ _____	Phone	\$ _____
Food Stamps	\$ _____	Car/ Insurance	\$ _____
401K Retirement Funds	\$ _____	Alimony	\$ _____
Alimony	\$ _____	Child Support	\$ _____
Other	\$ _____	Medical	\$ _____
		Other	\$ _____
Total Income	\$ _____	Total Expenses	\$ _____

You must attach a copy from last year's Internal Revenue Service Tax Statement, SSI allocation, unemployment compensation or any other income to verify your annual earnings. In addition a copy of your medical card must be attached to verify your dependents.