

## **Edgewater S.M.I.L.E.S Program Overview**

Supporting Movement In Edgewater Students

**Purpose:** The purpose of the S.M.I.L.E.S Program is to provide scholarships for use in recreational activities to families and students in Edgewater. The City of Edgewater maintains scholarship funds to help resident youth participate in recreation programs, who do not have the financial means to pay program fees.

**Funding Use:** The S.M.I.L.E.S Scholarship will cover 80% of the program fee. The remainder of the fee must be paid by the participant before registering for the program.

**Eligibility Requirements:** To receive a scholarship, the applicant must demonstrate that they qualify in the following categories.

**Income:** To qualify for this section applicant and/ or their family must meet at least one of the following criteria.

- 1. Child(ren) participate in the Free or Reduced lunch Program with the Jefferson County School District.
- 2. Child(ren) participate in the Head Start Program.
- 3. The family currently receives city, county, or state subsidized day care.
- 4. The family receives food stamps or other federal living assistance funding.

**Residency:** To qualify for this section applicant and/ or their family must meet at least one of the following criteria.

- 1. The family are residents of Edgewater.
- 2. Child(ren) attend one of the three Edgewater Schools (Edgewater, Lumberg or Jefferson).

**Application Process:** To apply for a scholarship, the parent or guardian of the child must fill out a S.M.I.L.E.S Application Form prior to the registration deadline for the program in which the applicant is interested in participating. The application can be filled out per household, with proof of eligibility if more than one student applies.

**Termination of Scholarship Rights:** Being awarded a scholarship is a privilege. All scholarship recipients and their families are expected to follow all rules and regulations set forth by the program and the facility. Any scholarship or family recipient found breaking the program rules, defacing the facility, or mistreating staff will lose future scholarship eligibility, and be removed from the program.

**Scholarship Availability:** Scholarships are limited for each program and are given on a first-come first-served basis.

**Submission:** Please submit applications to the Fitness Desk at the Edgewater Civic Center or email the form directly to Amber Magee at <a href="mailto:AMagee@EdgewaterCO.com">AMagee@EdgewaterCO.com</a>





## Edgewater S.M.I.L.E.S Application Supporting Movement In Edgewater Students

Parent /Guardian /Caregiver	Name:		
Address:			
Address:St	reet	City	Zip
Work Phone:		_ Home Phone:	
Email Address:			
List the name(s) of children a program fee.	pplying for the sch	olarship, age, program title, p	orogram number and
Child(ren) Name(s)	Age	Program Name	Fee
Please check all that apply shared with other applicant Family or children qualify for Federal Living Assistance Free/ Reduced School Me City, County, or state subsection Edgewater Head Start Produced Other financial support (id *Please attach support documents support.	es, program partice or: eal program sidized childcare ogram entify) nentation, letter or	a form acknowledging accep	otance to above financial
I,	nt this application for cholarship award. is accurate and tru	l also attest, to the best of my	pening or acceptance y knowledge, the
Legal Parent/ Guardian/ Care	egiver Signature	 Date	

