



RECREATION DEPARTMENT

Thomas L. Woodson
Recreation Director

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Recreation Technician

Town of Farmville Parks and Recreation Scholarship Application

Please return the completed scholarship form via email at twoodson@farmvilleva.com or mail to:

Town of Farmville Parks and Recreation Department
124 South Street
P.O. Box 368
Farmville, VA 23901

All information provided in this application will remain confidential.

- The Parks and Recreation Scholarship exists to help provide access to fee-based programs and services for customers in need of financial assistance.
- Staff will evaluate the circumstance on a case-by-case basis and make an eligibility determination. Also, the applicant must reside in Prince Edward County.
- The scholarship is not valid for special events, adult league sports, and classes.

Child's Name:		Phone:
Age:	Birth Date:	Email:
Address:		
Parent/Guardian Name:	Occupation:	Employer:
Parent/Guardian Name:	Occupation:	Employer:
Number of Other Children in Household:		Age(s):
Why does this child need a scholarship?		
Amount of Scholarship Assistance Requested:		
<input type="checkbox"/> QUARTER <input type="checkbox"/> HALF <input type="checkbox"/> OTHER If other, please state the amount \$		
Has this participant received a scholarship in previous years?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Has this participant attended a program in previous years?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, in which years?		
I certify that all the above information is true and correct. I understand that my child may receive a partial, half, or no scholarship to attend the program. Priority is given to the earliest applicants:		
PARENT/GUARDIAN SIGNATURE:		DATE:

Department Signature: _____

DATE: _____