

Punky Riley Scholarship Fund

PLEASE NOTE: Please submit application well in advance of the program for which you are requesting a scholarship. It takes time to verify your information and process paperwork. Two to three weeks prior to the registration deadline is highly recommended.

To receive a Punky Riley Scholarship:

- Participants must be 18 years of age or under
- Resident of Shenandoah County
- Receiving assistance from the Shenandoah County Department of Social Services
- Participants are limited to a total amount of \$100 per current Fiscal Year (July 1-June 30)
- May only apply for ACTIVE programs within the current Fiscal Year (July 1-June 30)

Parent/Guardian Name: _____

Participant/Child Name: _____

Mailing Address: _____ Town: _____ Zip: _____

E-Mail Address: _____

Cell Phone/Contact Number: _____

Activity Name: _____

Activity Code: _____ Activity Fee: _____

Scholarship Amount Requested: \$ _____ Social Service Case Worker: _____

NOTE: By signing below I give Shenandoah County Parks and Recreation permission to contact Shenandoah County Department of Social Services to release information regarding my child/family case in order to complete my scholarship request.

Parent/Guardian Signature

Date

Please submit both this completed Scholarship Form AND the Registration Form to:

1. E-mail: scpr@shenandoahcountyva.us
2. Fax: 540-459-8040
3. Mail: 600 North Main Street, Suite 108, Woodstock, VA 22664
4. Drop off to our office

OFFICE USE ONLY

Assistance through Department of Social Services verified: ____ YES ____ NO Date: _____ Staff: _____

Scholarship previously used for family member in fiscal year: \$ _____ (July 1-June 30)

Scholarship Awarded: \$ _____ Scholarship Remaining: \$ _____ Registration Fees Remaining: \$ _____

Approved By: _____ Date: _____