SOUTHWEST ADA LITTLE LEAGUE

Full and Partial Scholarship Request Form

Southwest Ada Little League (SWADALL) will not deny any child a chance to play baseball or softball due to financial hardship. Full or partial scholarships are available. Complete and return this form and the required information Southwest Ada Little League. (Email for more information: scholarship@swadall.com)

SCHOLARSHIP ELIGIBILITY REQUIREMENTS

To be eligible for a full and/or partial scholarship, you must provide Southwest Ada Little League the following documentation:

- A copy of an approved Free and Reduced Price Schools Meals Application from the local school attended.
- An explanation of the financial hardship (please explain in the FINANCIAL HARDSHIP EXPLANATION section below). Supporting documents may also be requested.
- Proof of residency indicating that the player(s) reside(s) within Southwest Ada Little League's boundaries.
- Proof of age indicating that the player(s) meet(s) Little League requirements in order to play in Southwest Ada Little League.

Home Address City State Zip Daytime Phone Evening Phone Mobile Phone E-mail Address FINANCIAL HARDSHIP EXPLANATION	Legal Guardian's Last Name	Legal Guardian's l Name	First Player's Name((s)	Schola Reque	rship sted
Daytime Phone Evening Phone Mobile Phone E-mail Address					□ Pa	artial Full
	Home Address		City	Ţ	State	Zip
FINANCIAL HARDSHIP EXPLANATION	Daytime Phone	Evening Phone	Mobile Phone	E-mail A	Address	
	INANCIAL HARDSHII	EXPLANATION	20 (5)	0		

I/We, as the Parent or Legal Guardian of my/our knowledge.	of the player(s) named above, attest to the	e truth for the above information to the best	
Parent or Legal Guardian Signature Date			
FOR SO	OUTHWEST ADA LITTLE LEAGUE USE	ONLY	
Date Reviewed:			
Full Scholarship Granted	Partial Scholarship Granted	Request Denied	
Amount: \$	Amount: \$	Reason:	