



KROC GREENVILLE

The Salvation Army Kroc Cares Scholarship Program

Please read carefully before applying for a Scholarship

The Salvation Army Kroc Center is pleased to provide access to our facility and programs. It was Joan Kroc's vision and expectation that all individuals have equal opportunities to develop and discover their natural gifts and talents. The Kroc Center is a world-class facility designed to do just that! We are delighted that you are interested in participating in our programs.

1. All Kroc Cares Scholarship Applications are strictly confidential.
2. Completion of the application does not guarantee assistance. Scholarships are awarded based on income. **You must have income to qualify** since The Salvation Army does not grant 100% discounted memberships or programs. There will always be a monthly fee or program fee. You must have enough disposable income to cover the cost of your scholarship.
3. Applications that do not have at least one proof of income living in the household or applications that do not include the accepted forms of income as deemed by the Scholarship Requirements will not be reviewed.
4. Scholarships are awarded on a first come, first served basis. Scholarships are awarded for a 12-month period. You will then be required to reapply with updated financial information. There are no guarantees that a new Scholarship will be awarded.
5. **Incomplete applications will not be processed. Section IV must be completely answered.**
6. **All qualifying candidates will be notified via email or in-person if required documentation is provided at registration.** Once approved, the applicant is invited to the center to complete their membership enrollment. A one-time \$10 registration fee will be collected. Award recipients must respond within 30 days of their award letter. You must agree to utilize the Kroc Center a minimum of (3) times per month to maintain active membership. Lack of use or misuse of your membership may result in discontinued scholarship assistance. *Must have a valid Photo ID*
7. If your scholarship lapses more than 60 days without payment, you will need to reapply to continue membership with your discount.
8. Scholarship Members must adhere to all Kroc Center guidelines and code of conduct.
9. The Salvation Army reserves the right to modify the Scholarship Program and guidelines at any time.



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SECTION I – APPLICANT INFORMATION

(Head of Household)

Have you received a Kroc Cares Scholarship before? When? _____

Are you currently a Kroc Center member? No ___ Yes ___ If Yes, ___ Standard ___ Scholarship

Name (First, MI, Last): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Main Phone: _____ Alternate Phone(s): _____

Email: _____ Age: _____ DOB: _____

What type of membership are you applying for: ___ Standard ___ Tennis ___ Plus

What programs are you requesting (List All): _____

SECTION II – OTHER HOUSEHOLD MEMBERS

List all people living in household with applicant

Name (First, MI, Last)	Age	Sex	Birthdate	Relationship to Applicant

SECTION III – HOUSEHOLD FINANCES

Please provide accurate information. Attach copies of proof of income to application.

Monthly Income		Monthly Expenses	
Wages	\$	Housing	\$
SSI, SSA, SSDI	\$	Utilities	\$
Unemployment or Workers Comp	\$	Transportation	\$
TANF	\$	Child Care	\$
Child Support	\$	Medical	\$
Alimony	\$	Other	\$
Other	\$		
Total	\$	Total	\$



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SECTION IV – ADDITIONAL INFORMATION

By joining The Kroc Center, how do you hope this will positively impact you and your family?

Are there any circumstances or stress factors that increases the necessity for a scholarship apart from financial need?

Additional information that you think will help us make our decision...



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SECTION V – ACKNOWLEDGEMENT AND SIGNATURE PAGE

I, _____, understand the guidelines of the scholarship program and agree to abide by them. I understand that failure to do so may result in the revocation of my scholarship membership at The Salvation Army Kroc Center.

I, _____, agree that all information I have provided on this application is accurate and complete.

Signature of Applicant: _____ Date: _____

SECTION VI – SUBMITTING YOUR APPLICATION

When submitting your application, (including items in SECTION VI), please drop it off at the front desk or mail to:

The Salvation Army Kroc Center – Greenville
Attn: Membership Manager
424 Westfield St.
Greenville, SC 29601

OR, submit by email to lisa.richardson@uss.salvationarmy.org, Subject Line: Kroc Cares Application

SECTION VI – DOCUMENTATION REQUIRED FOR REVIEW (COPIES ONLY, PLEASE DO NOT SUBMIT ORIGINAL DOCUMENTS)

Please attach/bring in current documents to verify each source of income that you listed in SECTION III.
Applications without proof of income cannot be processed.

- Valid Picture ID for all applicants 18+
- Identification for all children included on application (Birth Certificate, Report Card, Medical Card)
- Proof of income for all members of the family, **at least one for each adult listed** (Most Recent Tax Return, Pay Stub, SSI/SSDI Award Letter, Child Support, Retirement, etc.)
- Proof of Financial Assistance, at least one (SNAP, Housing Assistance, etc.)

Thank you for taking the time to thoroughly complete this application so that we may best serve your needs.
Keep an eye on your email for any questions or Kroc Cares Scholarship Approval!