



DYC Junior Sailing Club, Inc.

Scholarship Application

Student Information:

Child's Name: _____ Date of Birth: ____/____/____

Primary Parent Information:

Name: _____ Phone (H): _____ Phone (W): _____

Address: _____ Phone (C): _____

City: _____ St: _____ Zip: _____ Email: _____

Are you a single parent with sole financial responsibility for your child? Yes No

Occupation: _____ Employer: _____

Address: _____ City: _____ St: _____ Zip: _____

Your individual *yearly* income from work before deductions for taxes and social security

\$15,000 – \$30,000

\$30,001 – \$40,000

\$40,001 – \$50,000

\$50,001 – \$60,000

\$60,001 – \$70,000

\$70,001 or more

If you are unemployed, please give most recent position, employer, city, and dates of employment:

Partner Information:

If you are not a single parent, please provide the following information regarding your partner:

Name: _____ Phone (H): _____ Phone (W): _____

Address: _____ Phone (C): _____

City: _____ St: _____ Zip: _____ Email: _____

Occupation: _____ Employer: _____

Address: _____ City: _____ St: _____ Zip: _____

Partner's individual *yearly* income from work before deductions for taxes and social security

\$15,000 – \$30,000

\$30,001 – \$40,000

\$40,001 – \$50,000

\$50,001 – \$60,000

\$60,001 – \$70,000

\$70,001 or more

If partner is unemployed, please give most recent position, employer, city, and dates of employment:
