

## **2018 YMCA Central Leaders School Application for Financial Assistance**

Financial assistance is limited by the finite amount of funds available. Funding allocation will be based on accurate information submitted on this application and when it is received. Please make sure all information is filled in correctly, both pages completed legibly, and signed by appropriate Y staff. Unsigned or incomplete forms will be returned. Thank you.

**Criteria:**

1. The recipient must be a member in good standing of a local Teen Leaders Club or other comparable YMCA teen program.
2. The recipient must demonstrate financial need.
3. The recipient's parents/guardians, Teen Club Advisor and the YMCA Executive Director must approve this application.
4. The recipient's home YMCA will also be required to provide some financial assistance so that the applicant will have the opportunity to attend YMCA Central Leaders School.
5. The recipient must describe why he/she wants to attend YMCA Central Leaders School.
6. Following YMCA Central Leaders School, the recipient agrees to send a thank you letter to the Central Leaders School Director describing the impact of his/her CLS experience.

Return completed applications to Dan Schulze by June 30, 2018. Fax to 314-645-0025, email to [registrar@leaders-school.org](mailto:registrar@leaders-school.org), or mail to 3150 Sublette Ave, St. Louis, MO 63139.

Name \_\_\_\_\_ Application Date \_\_\_\_\_ Number of prev years at CLS \_\_\_\_\_  
Email \_\_\_\_\_ Phone ( ) - \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Local YMCA \_\_\_\_\_ Staff/Advisor \_\_\_\_\_  
Phone ( ) - \_\_\_\_\_ Email \_\_\_\_\_

Amount being requested from CLS \$ \_\_\_\_\_  
Amount to be paid by applicant's YMCA \$ \_\_\_\_\_  
Amount raised by club fundraisers \$ \_\_\_\_\_  
Amount to be paid by parent/guardians \$ \_\_\_\_\_

We attest that records are on file at our YMCA that demonstrate this applicant's family's need for financial assistance.

Leaders Club Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Executive Director Signature \_\_\_\_\_ Date \_\_\_\_\_

Why I want to attend YMCA Central Leaders School:

How I have contributed to my YMCA and/or Leaders Club over the past year:

Leader's Signature \_\_\_\_\_ Date \_\_\_\_\_

Why I want my daughter/son to attend YMCA Central Leaders School:

We are requesting financial assistance due to:

Annual Household Income \$ \_\_\_\_\_ Number of people in the household \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_