



VSA Florida – Palm Beach County

Scholarship Program Proposal

Purpose:

VSA Florida – Palm Beach County believes that everyone who wants to participate in VSA programs should be able to do so, regardless of economic status. This scholarship program helps underwrite the cost of the recreation program for those individuals who fall within a certain income level or meet the following criteria.

The purpose of these scholarships is to assist people with disabilities to achieve their social, emotional, intellectual, physical and leisure goals.

Applicant Eligibility:

This program is open to any Palm Beach County resident, over the age of 18, regardless of gender, race or religion. Proof of residency, income and *confirmation of diagnosis* must accompany application. Scholarship eligibility is based on the most current Federal Poverty Guidelines as determined by the Department of Health and Human Services and/or the following criteria.

Criteria:

- *any age, resides in a group home*
- *living independently, receiving SSI benefits*

Application:

Each family that wishes to apply for a scholarship must fill one application out for the fiscal year. The fiscal year begins October 1st and ends September 30th. All appropriate backup documentation, such as tax returns and *medical diagnosis*, must be submitted with the application (W-2's are not accepted). No application will be reviewed until all necessary documentation is received.

Review Process:

The Visual or Performing Arts Coordinator will collect information and, after review, forward it to the Director. The Director will review all scholarship applications and make the determination of who is to receive scholarships and what percentage discount will be applied. The Director will have final approval. All decisions will be based on the approved matrix structure.

Awards:

If awarded a scholarship, each family member is eligible to register for 1 program per season at a discounted rate, (Fall/Winter, Spring/Summer). Summer Camp does not count as one program. Scholarship applicants with incomes at 125 percent of the Poverty Guidelines will qualify for a 50 percent reduction in fees.

Awards for participants residing in group homes will be determined on a case by case basis. Programs designed for specific agencies, i.e. the ARC, JCC, Nursing and Assisted Living Facilities will be determined on a case by case basis.

Revenue Off-set:

With the establishment of the VSA scholarship program, *some* fees will be set at full cost recovery. Those individuals not able to afford the full fee will be able to apply for a scholarship to off-set the cost of the program.

Deadline to Apply:

Following are the deadline dates to apply for a scholarship:

Fall/Winter Programs	<i>August 25th</i>
Spring/Summer Programs	<i>February 25th</i>

Applications submitted after the deadline will not be reviewed until the following season.



VSA Florida – Palm Beach County
Scholarship Program

CHECKLIST

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Applicant's Initials

Application

Photo ID (Driver's license, Resident alien card, Work ID)

2014 Tax Return (22 yrs. old and under)

Social Security Award Letter (SSI, SSDI, SSA) (23 yrs. old +)

Release of Information Form (signed)

Guardianship Affidavit (if applicable)

Rights & Responsibilities Form (signed)

ELIGIBILITY GUIDELINES

- Income meets Federal Poverty Guidelines



VSA Florida - Palm Beach County
Scholarship Program

Application Date: _____

Applicant/Head of Household: _____ SS#: _____

Current Address: _____

Mailing Address: _____

E-mail Address: _____

Phone #: _____ Birth Date: _____

Emergency Contact: _____ Phone #: _____

Do you work? Yes No Full-time Part-time

Annual Income: _____ Current Employer: _____

Employer Address and Phone #: _____

By completing this application, I hereby waive any right to make a claim against VSA Florida – Palm Beach County arising from any action or inaction by the programs or its personnel and release VSA Florida – Palm Beach County from any liability.

Parent/Guardian Signature

Date

VSA Florida - PBC Staff Signature

Date



VSA Florida – Palm Beach County
Scholarship Program
Agreement of Understanding

RIGHTS AND RESPONSIBILITIES

As a client of VSA Florida-Palm Beach County, you have the following rights and responsibilities:

YOUR RIGHTS:

- A. An evaluation to determine eligibility for services
- B. Freedom from discrimination based on sex, race, color, religion, national origin, marital status, political affiliation, disability, or sexual orientation
- C. Notification of eligibility decision

YOUR RESPONSIBILITIES:

- A. To provide all accurate and correct information requested in the eligibility and service provision process in a timely manner

By signing this form you agree that you understand your rights and responsibilities.

Signature

Date

VSA Florida – Palm Beach County
Scholarship Program



Authorization to Release Form

I, _____, hereby grant permission for and authorize the release of information to VSA Florida – Palm Beach County as follows:

- To take and/or use photographs and/or statements of my child(ren) for published informational purposes (i.e. brochures, newsletters, posters, flyers).
- Exchange information regarding your child(ren) with the Visual & Performing Arts Coordinators and Director.
- Communicate by electronic mail.

Child(ren) Name(s) (if applicable):

1. _____
2. _____
3. _____

Your signature gives VSA Florida – Palm Beach County authorization in all three designated areas.

Signature of Parent/Guardian

Date

Witness

Relationship to Individual

Exemption from Public Records Request - Florida Statute, Section 119

“Any information that would identify or help to locate a child who participates in government-sponsored recreation programs or camps or the parents or guardians of such child, including, but not limited to, the name, home address, telephone number, social security number, or photograph of the child; the names and locations of schools attended by such child; and the names, home addresses, and social security numbers of parents or guardians of such child is exempt from s. [119.07\(1\)](#) and s. 24(a), Art. I of the State Constitution. Information made exempt pursuant to this paragraph may be disclosed by court order upon a showing of good cause. This exemption applies to records held before, on, or after the effective date of this exemption. “

Eligibility

- a. Applicant(s) household must fall within 125% of the Federal Poverty Level Guidelines within the application year.
- b. Eligibility will only be determined for applicants that have submitted all required documentation by the deadline of the seasonal program application process.

Application Documentation Requirements

- a. Income tax returns/W2 for parents(s)/guardians(s)/legal adult for 2010.
- b. Award letter from the following:
 1. SSI
 2. SSA/SSDI
 3. Unemployment printout

ALL HOUSEHOLD INCOME MUST BE REPORTED AT THE TIME THE APPLICATION IS BEING PROCESSED FOR ELIGIBILITY. INCOME WILL NOT BE ADJUSTED AFTER THE APPLICATION HAS BEEN SUBMITTED FOR PROCESSING.

- c. Picture identification for all adult members of the household (driver's license, resident alien card, State of Florida identification card).
- d. Birth certificates for all applicants. If birth certificates are not available, school records are acceptable.



2015 HHS Poverty Guidelines			
Persons in Family	48 Contiguous States and D.C.	Alaska	Hawaii
1	\$11,770	\$14,720	\$13,550
2	15,930	19,920	18,330
3	20,090	25,120	23,110
4	24,250	30,320	27,890
5	28,410	35,520	32,670
6	32,570	40,720	37,450
7	36,730	45,920	42,230
8	40,890	51,120	47,010
For each additional person, add	4,160	5,200	4,780