



DAKOTA ALLIANCE SOCCER CLUB SCHOLARSHIP EXPECTATIONS

Please read the following Expectations prior to filling out the application:

- Players awarded a scholarship must be committed to the team like any other player. Consequences for not complying with the team/coach/club expectations, up to and including the potential loss of current and future scholarships, can be expected.
- A minimum of \$100 must be paid by each player. The due date will be noted in the Scholarship Award Letter that players will receive once approved for Scholarship funds but will be before December 1st. If not paid on time, the player will not be allowed to train or travel with the team until paid. The same is true of any other funds due as stated in your Scholarship Award Letter.
- A minimum of \$100 must be paid by each player toward their uniform prior to the uniform being ordered.
- Players are responsible for their rides to and from practices, games, and tournaments. The team will do their best to help figure this out in some instances but is ultimately on the player. Communication is key here!
- No player will receive a 100% paid scholarship. Every player will be responsible for some payments.
- During the year, players/teams/DASC may arrange and hold fundraisers to help with fees for everyone, including players on scholarship. This can help with costs required after any scholarship funds that were awarded have been exhausted. Fundraisers are not to be relied on for funding.
- Players may also be awarded the chance to receive help with meals during tournaments, up to \$40 per tournament. The balance of funds for meals will need to come from the players or fundraising.

This program exists to create opportunities for athletes to participate in Dakota Alliance Soccer Club that might not be possible due to financial reasons. Please read and complete all the information in this application to be sure you meet all the qualifications and supply all the necessary information.

For Financial Assistance requests there are no deadlines.



DAKOTA ALLIANCE SOCCER CLUB SCHOLARSHIP APPLICATION

Player Name: _____

Birth date: ____/____/____ Gender & Birth Year (e.g. 2009 Girls): _____

Name of Parent or Guardian: _____

Mailing address: _____

City, State, ZIP: _____

Email Address(es): _____

Parent/Guardian Contact Phone(s): _____

Preferred Contact Number/Email: _____

How many adults _____ children _____ are supported by your household income?
How many working adults are there in the household? _____

*Please attach a copy of your most recent tax return, if available, as that will help with figuring out the award level.

Also, the Parent/Guardian must submit proof of their child's current and active enrollment in one or more of the approved financial needs verification programs. Please check ALL applicable boxes and include documentation for those checked. Submit the required documentation for each.

- ☐ **SNAP- Supplemental Nutrition Assistance Program**
(SNAP Enrollment Document with child names and dates required)
- ☐ **MEDICAID**
(Medicaid Enrollment Document with child names and dates required)
- ☐ **SD School Free & Reduced lunch Program**
(Free/Reduced Lunch Enrollment Document with child names and dates required)
- ☐ **WIC – SNAP for Women, Infants & Children**
(WIC Enrollment Document with child names and dates required)
- ☐ **Extenuating Personal Circumstances**
(Letter with details of extenuating circumstances required)
- ☐ **Income Below State Average**
(Copy of most recent year's tax return required)
Adjusted Gross Income (Line 11 on Tax Return) \$ _____

All statements in this application are true to the best of my knowledge.

Signature of applicant (Parent/Guardian if under 18)

Printed Name

Today's date: ____/____/____