

## Port of Silverdale & Kitsap Sailing Foundation Scholarship Application

To apply for a scholarship to participate in Port of Silverdale sailing programs, complete this application, and return it in person to the Port of Silverdale, 3550 NW Byron St, Silverdale, WA 98383, or mail it to the same address.

Applicant's Name: \_\_\_\_\_

Name of Parent or Legal Guardian: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

1. There are \_\_\_\_\_ individuals residing in the household.
2. For the previous calendar year the combined total net income from all sources (including wages, welfare, social security, child support, disability, etc.) of all household residents was \$\_\_\_\_\_.
3. Applicant's Date of Birth: \_\_\_\_\_

Check one or more that apply, and provide verifiable documentation:

- Applicant meets Household Income Eligibility Guidelines taken from Free/Reduced Lunch Guidelines established by one of the school districts in Kitsap County.
- Applicant is currently a foster child living in a foster home in Kitsap County.
- Applicant is currently under the supervision of the Kitsap County Superior Court Juvenile Services Department.
- Applicant is receiving one or more forms of public assistance from the State of Washington Department of Social and Health Services.
- Applicant is residing in Kitsap Consolidated Housing Authority housing.

I, \_\_\_\_\_, hereby declare under penalty of perjury under the laws of the State of Washington that the information provided in support of this scholarship application is true and correct.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, in \_\_\_\_\_, Washington.  
(day) (month) (year) (city, town)

**All information provided in support of an application will be kept confidential. Members of Kitsap Sailing Foundation and their families are not eligible.**