The Ability to Participate

We understand that there are circumstances when financial limitations hinder participation in Kenan Center programs.

If you are in need of financial assistance for yourself or your children, please complete this application and mail to or drop off at the Kenan Center.

All information provided is confidential.

Scholarship Guidelines

- Preschool deadline is the last day of February each year for the following academic year.
- KidQuest Summer Programs deadline is June 15th each year.
- Soccer deadline is the same deadline as the soccer session registration deadline.

For all programs

- All families expected to pay at least 15% of enrollment/tuition fees.
- Supporting financial documents (such as verifiable tax/free & reduced lunch approval documents) may be required.
- A limited number of needs-based scholarships are available. Please submit applications as soon as possible for consideration.

Updated: February 2018
Subject to periodic updates due to program deadlines.

Kenan Center enriches lives by providing the community with cultural, educational, and recreational opportunities.
Please use a separate form for each person applying for assistance.

**ALL INFORMATION PROVIDED IS CONFIDENTIAL.**

Application Date __________________________

Are you currently a member of Kenan Center?  
☐ YES ☐ NO

If not, would you like this scholarship to include a membership to the Kenan Center?  
☐ YES ☐ NO

Full Name ________________________________________________

Street Address ________________________________________________

City, ST, ZIP ________________________________________________

Employment Information

Guardian #1 Employer/Former Employer _____________________________  
Guardian #1 Occupation _____________________________

Guardian #2 Employer/Former Employer _____________________________  
Guardian #2 Occupation _____________________________

Program Information

Program(s) Desired ________________________________________________

Who is enrollment for? (Myself/My Child) _____________________________

Child’s Name ________________________________________________

Child’s DOB______________________________________________

Requesting Assistance Amount: $ _____________________________

Briefly explain why you are requesting assistance. ________________________________________________

Were there any significant life events that caused you to require assistance?  
________________________________________________

Household Income Information

Salary #1 $ __________________  
Salary #2 $ __________________ (if applicable)  
Other Income: $ ______ Sources: __________________

Household Expense Information

Mortgage/Rent (monthly): $ __________________

Utilities: $ __________________

Car Payments: $ __________________

Other Loans: $ __________________

Credit Cards: $ __________________

Insurance: $ __________________

Other Tuition Expenses: $ __________________

Other Expenses: $ __________________

YOU MAY ATTACH ADDITIONAL SHEETS OF INFORMATION TO HELP US BETTER UNDERSTAND YOUR SITUATION.

PARENT/GUARDIAN SIGNATURE: ________________________________________________

FOR OFFICE USE ONLY

Date Received _____________________________

Referred By _____________________________

Amount Requested _____________________________

Amount Approved _____________________________

Approved By _____________________________

Date Notified _____________________________