

Please read before signing the application.

Financial assistance is available for families with children who desire to join classes offered at Stars Gymnastics LLC locations, but are unable to pay the tuition fee. Each family or individual must meet the eligibility guidelines to receive financial assistance for their child(ren). If your family does not meet the income eligibility guidelines, but is currently experiencing extenuating circumstances, complete the Participation Scholarship Application AND explain your circumstances for consideration. Granting of assistance is based on total family income level (see chart below).

Household Size	Annual	Monthly	2X/Month	Every 2 Weeks	Weekly
1	\$21,775	\$1,815	\$908	\$838	\$419
2	\$29,471	\$2,456	\$1,228	\$1,134	\$567
3	\$37,167	\$3,098	\$1,549	\$1,430	\$715
4	\$44,863	\$3,739	\$1,870	\$1,726	\$863
5	\$52,559	\$4,380	\$2,190	\$2,022	\$1,011
6	\$60,255	\$5,022	\$2,511	\$2,318	\$1,159
7	\$67,951	\$5,663	\$2,832	\$2,614	\$1,307
8	\$75,647	\$6,304	\$3,152	\$2,910	\$1,455

Application Procedure & Deadlines:

- Applications may be submitted anytime during the calendar year. Financial assistance approved amounts are based on qualification and the number of months remaining in the calendar year.
- In order to receive a full calendar year of financial assistance, applications must be submitted by December 1st of the previous year.
- Renewal of the Financial Assistance Application is required by December 1st, no matter what month it was originally submitted.
- Hardship and other unusual circumstances will be considered in addition to the above income guidelines.
- All applicants will be notified of their application status within 3 weeks of submitting complete application.
- Incomplete applications will not be considered.
- All information will be kept confidential

Eligibility:

- Recipient (class participant) must be 3 years of age or older.
- Applicant must submit all documents along with application (at same time).
- Must fulfill all requirements stated in the following application.

Things to remember:

- A one calendar month break from classes, per calendar year, is permitted *with 2 weeks advance written notice*. Missing classes for more than one calendar month during the calendar year, will result in a cancellation of the Participation Scholarship for the remainder of that calendar year. Remaining funds will be forfeited. Applicants may reapply for the following year. A doctor's note for illness or injury will excuse absences.
- Lack of notification and an absence from classes for any 4 week/monthly session, will void application for the remainder of the calendar year. Remaining funds will be forfeited.
- Application for and/or approval of financial assistance does not guarantee a space in a specific class.
- Scholarship funds must be utilized, by the designated recipient each month. Transferring scholarship funds is not permitted.
- The approved designated amount of financial assistance is based on income and family size, as well as funds available from Cartwheel 2 Success at the time application is received.

How much of class registration fees will the C2S scholarship program cover?

Recreational Students:

- The C2S scholarship program will cover 20%-30% of your child's recreational class tuition fee, not to exceed a maximum of \$280.00 per calendar year, per child or \$46.80 per eight (8) week session, for partial year scholarships.
 - This is based on regular recreational class tuition at \$140-\$156 per eight-week session, one day per week.
 - Depending on the actual cost of the class or activity, parents are responsible for paying the remaining balance of the tuition fee.
 - Scholarship funds may also be used towards up to 10%-30% of tuition fees for any other class or event offered at Stars Gymnastics LLC locations, not exceeding the said annual scholarship amount.
 - Scholarship funds may be used towards the cost of the required annual membership, not exceeding the said annual scholarship amount.
 - Scholarship funds may not be used for purchasing: Snacks. Drinks. Apparel. Private Lessons.
 - All recipients of Cartwheel 2 Success financial assistance are required to enroll in Auto-Pay, providing Stars Gymnastics with written authorization to process the balance due for each eight-week session. The balance will be paid in two transactions per session (50% of the balance processed on the 15th of each month)

Competitive Team Members:

- The C2S scholarship program will cover between 10%-25% of your child's competitive team practice tuition, not to exceed a maximum of \$540 per competitive season or \$45 per month for qualified mid-season applicants.
 - This is based on team practice tuition ranging from \$166-\$350 per month, depending on the number of hours the athlete's team practices per week.
 - Depending on the actual cost of the team practice tuition, , parents are responsible for paying the remaining balance of the tuition fee.
 - Scholarship funds may also be used towards 10%-25% of additional team training classes such as; tumbling, bars classes, dance and/or strength conditioning, which are offered at Stars Gymnastics LLC locations, not exceeding the said annual scholarship amount.
 - Scholarship funds may be used towards the cost of the required annual membership, , not exceeding the said annual scholarship amount.
 - Scholarship funds may not be used for purchasing: Snacks. Drinks. Apparel. Routine Music. Private Lessons.
 - All recipients of Cartwheel 2 Success financial assistance are required to enroll in Auto-Pay, providing Stars Gymnastics with written authorization to process the balance due for each eight-week session. The balance will be paid in two transactions per session (50% of the balance processed on the 15th of each month)
 - All team members receiving financial assistance from Cartwheel 2 Success, are required to participate in every available fundraiser, provided for team members, by Stars Gymnastics LLC. Recipients must make an effort to help themselves through these opportunities.

DEFINITION:

- Applicant is the person filing the application and the head of the house hold.
- Recipient is the child or children who the scholarship will be used for.

Application

Personal Information

Section 1: Head of Household (1)

Full Name:		Male <input type="checkbox"/> Female <input type="checkbox"/>
Date of Birth:	Last four digits of Social Security #:	
Address:		
City	State	Zip
Home Phone #	Cell Phone #	
Email Address		

Co-Head of Household (if applicable)

Full Name:		Male <input type="checkbox"/> Female <input type="checkbox"/>
Date of Birth:	Last four digits of Social Security #:	
Address:		
City	State	Zip
Home Phone #	Cell Phone #	
Email Address		

Section 2: Dependents (Do not leave any blanks. List Recipient(s) first)

Recipient ✓	Full Name	Relationship	Monthly Income	Age	Date of Birth
	1.				
	2.				
	3.				
	4.				
	5.				

Employment Information (Employment Verification will be done)

Section 3: Head of Household Employer

Name:		Self Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:			
City	State	Zip	
Title:	Years at this Job:	Salary: \$	/ <input type="checkbox"/> Hr <input type="checkbox"/> Year
Phone Number:		Supervisor:	
Hours worked per week:		Contact: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Co-Head of Household Employer (if applicable)

Name:		Self Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address:			
City	State	Zip	
Title:	Years at this Job:	Salary: \$	/ <input type="checkbox"/> Hr <input type="checkbox"/> Year
Phone Number:		Supervisor:	
Hours worked per week:			

Additional Income

Such as:	
Type of Income	Type of Income
Amount: \$ <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> Hourly	Amount: \$ <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> Hourly
Type of Income	Type of Income
Amount: \$ <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> Hourly	Amount: \$ <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly <input type="checkbox"/> Hourly

2018 CARTWHEEL 2 SUCCESS -PARTICIPATION SCHOLARSHIP APPLICATION

Recipient(s) Information

Section 4: *If applying for multiple recipients, submit a separate Section 4 for each.*

Name:		Date of Birth:	
Currently enrolled in classes at Stars Gymnastics?		Yes or No <i>(Circle)</i>	
Month/Year of first class:	Current Class Days: Mon Tues Wed Thur Fri Sat <i>(Circle)</i>		
Current Classes: <i>(Circle)</i> Gymnastics Tumbling Go Ninja Fitness Other			
Applicant's Relationship to Recipient			

Other Extra Curricular Activity Recipient is Involved in	
Name of Club/Organization:	# Years Involved:
Activities/Purpose of club:	

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Name of Club/Organization:	# Years Involved:
Activities/Purpose of club:	

Any additional information that you would like to share about the recipient.

Supporting Documents

Section 5: Please attach the following to your application. Everything must be submitted together.

- 3 Most recent pay stubs, award letters, SSI, SS, Unemployment, Child Support, etc.
- Most recent Tax Forms (full packet)
 - *Proof of qualification for free school lunches may replace this requirement; (not including Baldwin Park Unified School District, who provides free lunch for all students)*
- Previous Year W2
- Most recent utility bill (Full Copy)
- Valid California ID, showing proof of current California address

PLEASE UNDERSTAND THAT OTHER DOCUMENTS MAY BE REQUESTED.