

YMCA Point Bonita Outdoor Education Financial Assistance Application

YMCA Point Bonita strives to make its education programs available to all students regardless of economic status. The YMCA Point Bonita Outdoor Education Program has established a scholarship fund for the purpose of providing assistance to those who would not otherwise be able to attend Point Bonita Outdoor Education residential programs.

Many thoughtful individuals recognize the valuable impact on a person's life that participation in a YMCA Point Bonita experience can make. Thanks to the support of our community members and private donors, we are pleased to offer financial assistance to qualifying schools.

The YMCA Point Bonita Financial Assistance Program is a competitive process. Due to limited funds, not all applicants will receive awards or the full amount requested. It is expected that each school will contribute towards the cost of the program to the extent of each of their ability.

The level of award is determined on combined criteria including; demonstration of financial need, school effort and commitment to the program, and the number of application requirements met. Applicants receiving an award will be notified by mail or email, and the amount will be credited against your final invoice.

Criteria Includes:

1. Student Financial Need: You are required to provide verification of number of students eligible for free/reduced lunch.
2. School Effort: Tell us about your school's plan(s) to raise funds for attending YMCA Point Bonita Outdoor Education Program.
3. Application Requirements: A completed Financial Assistance Application and supporting documentation must be submitted.

Please fill out the application for financial assistance *in full*, and attach any supporting documentation. Mail your application form along with supporting documentation to YMCA Point Bonita, 981 Fort Barry GGNRA, Sausalito, CA, 94965 Attn: Reservations Coordinator Rochelle Tolbert, fax to (415) 331-2567, or email (with electronic signature) to rtolbert@ymcasf.org.



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA Point Bonita Outdoor Education Financial Assistance Program

Please complete the entire form, sign and date it. **All information on this form will be kept strictly confidential, except information submitted to the YMCA Point Bonita to provide to our funders (Section 4 – Additional Requirements).** Completion of this application does not guarantee approval of assistance or the full amount requested.

Application Instructions

Please fill out the application for financial assistance *in full*, and attach any supporting documentation. Mail your application form along with supporting documentation to YMCA Point Bonita, 981 Fort Barry GGNRA, Sausalito, CA, 94965 Attn: Reservations Coordinator Rochelle Tolbert, fax to (415) 331-2567, or email (with electronic signature) to rtolbert@ymcasf.org.

Section 1 – Applicant Information

School Name _____

Address _____

County _____ School Phone _____

Contact Person _____ Email _____

When is your visit to YMCA Point Bonita? _____

Has your school/group received financial assistance from us in past years? (Circle one) YES NO

Please describe the cultural diversity of your school.

African American: _____% Asian-Pacific Islander: _____% Caucasian: _____%

Hispanic: _____% Native American: _____% Other: _____%

Section 2 – Student Financial Need

How many students are at the school (entire student body)? _____

How many students qualify for the Federal Free and Reduced Lunch Program/National School Lunch Program? _____

What percentage of these students qualify for Free and Reduced Lunch? _____%
(Divide the number of qualifying students by the number of students at the school)

(Optional) You may attach an additional sheet explaining extenuating circumstances or other factors that we should take in consideration in evaluating your need for assistance.

Section 3 – School Effort

Tell us what your school expense is and about your plan(s) to fund the program.

Total YMCA Point Bonita fees \$ _____
 Transportation cost \$ _____
 Other expenses \$ _____
 TOTAL COST: \$ _____

Family/student contributions \$ _____
 Fundraising activities (Contact us for ideas) \$ _____
 Outside funding (federal, state, school district, community support, grants) \$ _____
 School funds \$ _____
 TOTAL CONTRIBUTION: \$ _____

Amount of financial assistance requested \$ _____

*We may not be able to allot the full amount requested

Section 4 – Additional Requirements

Along with your application please provide the following supporting documentation:

1. A document indicating either the percentage or the number of qualifying and total students from the district or federal government on official letterhead.
2. We need to provide documentation to our community and funders to ensure continued support of our financial assistance program. We request that you send us a letter of support explaining the impact our program had on your students. You may also send additional information about your trip (pictures, thank you letters from students, journals, curriculum used in classroom, etc.) to use in reporting to our community and funders. *These items may be sent post visit.*

Acknowledgement

I acknowledge by my signature below, that all of the information on this form is accurate and complete. I am aware that on-time program payments are required to receive financial assistance awards. I understand that I am subject to the rules and regulations of the YMCA.

 Principal/Administrator Signature Title Date

 Teacher/Trip Organizer Signature Title Date

Your signature indicates that you understand the policies and procedures of the YMCA Financial Assistance Program.

YMCA financial assistance is made available through donations, grants, and association earned income.

YMCA Point Bonita would like to thank you for your application and for participating in the YMCA Point Bonita Outdoor Program. Additional information can be found at pointbonitaymca.org or by calling (415) 331-9622.

For office use only

Date Received:	Approved/Denied:	Total Award Amount:
Approved/Denied by:		Date:
Funder 1:		Amount:
Funder 2:		Amount:
Funder 3:		Amount: