

## Application for Individual Financial Assistance

---



Overtime Training Foundation is dedicated to having all interested youth able to participate in programs at our facility, regardless of ability to pay. We offer financial assistance for Overtime Training programs, to the extent possible, to financially challenged youth and their families. We invite you to fill out the application below to be considered for financial assistance at Overtime Training.

Full and partial scholarships are available for monthly workouts, camps, and clinics for youth kindergarten through high school.

To process an application, Overtime Training **requires** that each applicant submit the following items:

- Completed Confidential Application for Financial Assistance
- Copy of most recent year's tax documentation (e.g. form 1040)
- Copy of current pay stub, social security check or disability check

A decision cannot be made without all required information, incomplete applications **will not** be processed.

Completed applications can be submitted by email to [ottfoundation@gmail.com](mailto:ottfoundation@gmail.com) or dropped at the Overtime Training gym located at First Assembly of God in Walla Walla.

If you have any questions or concerns throughout the process, please contact our Charitable Giving Coordinator at 509.520.5124 or at the email listed above.

We look forward to assisting you as you take part in our basketball programs.



# Application for Individual Financial Assistance

## Parent/Guardian Information

Guardian Name	_____			
Address	_____			
Phone	(    )	City	State	Zip
Household Size	# of Adults _____	# of Children	_____	
Email	_____			
Employer	_____			
Employer Phone	(    )	_____		

## Participant Information

Participant # 1	_____	Gender:	_____		
Date of Birth	____/____/____	Grade:	_____		
Program Applying For:	_____	Age Group:	_____	Dates:	_____
Participant # 2	_____	Gender:	_____		
Date of Birth	____/____/____	Grade:	_____		
Program Applying For:	_____	Age Group:	_____	Dates:	_____
Participant # 3	_____	Gender:	_____		
Date of Birth	____/____/____	Grade:	_____		
Program Applying For:	_____	Age Group:	_____	Dates:	_____

Current GPA for student participant(s): \_\_\_\_\_

Has the above participant(s) ever participated in an Overtime Training program (circle one): **Yes** **No**

If so, when and what program: \_\_\_\_\_

Has the above participant(s) ever received financial assistance from OT Foundation: (circle one): **Yes** **No**

If so, when: \_\_\_\_\_

What was your **family's total gross income** for last year? \$\_\_\_\_\_.

# Application for Individual Financial Assistance



Please describe what previous playing experience this participant has had with basketball or other sports:

---



---

List gross monthly income from all individuals living in the household

	Applicant	Spouse/Other
Wages/Salary	\$ _____	\$ _____
Child Support	\$ _____	\$ _____
Other*	\$ _____	\$ _____
Total Income	\$ _____	\$ _____

\*Please list all other sources of income (DSHS or State/Federal Support)

---



---



---

Please explain why you would like to be considered for financial assistance through OT Foundation:

---



---



---



---

I certify that the above information is true and complete to the best of my knowledge and that I have enclosed with this application **the mandatory copy of my most recent pay stub and last year's federal income tax form (1040 or other documentation):**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>Received By:</b> _____ <b>Date:</b> _____
<b>Comments:</b>

# Application for Individual Financial Assistance



## **Conditions of Financial Assistance**

Approval for OT Foundation financial assistance does not guarantee a right to continued participation. Due to the nature of Overtime Trainings basketball programs, we must reserve the right to remove participants who are consistently disruptive. Players who refuse to participate or cooperate with instructors, who repeatedly detract from the experience of other participants, or who behave aggressively toward others, may be suspended or expelled from the program at the sole discretion of the Overtime Training staff.

Fighting or physical hostility of any sort will not be tolerated, and will result in immediate expulsion from the program.

Overtime Training Foundation reserves the right to terminate participation based upon attendance. Participants must contact program managers or the director of outreach when they will be absent from their scheduled program. Participants who have more than 3 unexcused absences will not be allowed to continue and may lose their financial assistance as determined by the Overtime Training Foundation Board.

If athlete decides to no longer participate with Overtime Training, athlete must notify the Overtime Training staff immediately. Failure to do so could jeopardize future funding. Scholarships from the Foundation are available on a year to year basis – families must reapply each year to receive continued funding.

Student athletes that receive scholarships from the Overtime Training Foundation will be held accountable for monthly grade checks that will be provided to Coach Garnett. Failure to provide grade checks are also grounds for suspension or expulsion.

I have read the above statement of conditions and my signature indicates my agreement to these terms:

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_