



## SANDY SPRINGS

RECREATION AND PARKS

### Scholarship Program

The City of Sandy Springs Recreation & Parks Department offers a variety of quality programs that support the interests, skills and passions of the community.

The Recreation and Parks Department is currently offering scholarships to participant's ages 2–17.

The scholarship program is awarded on a first come first served basis and is only awarded once per calendar year per participant. Scholarship awards must be used for the awarded program only and within the program season/calendar year.

Requests must be submitted with proof of residency and a letter from the school administration stating that the participant receives free/reduced lunch. Participants who are not residents and/or don't receive free/reduced lunch through their school will be evaluated on a case by case basis and can only be approved by the department.

The scholarship **deadline** varies according to the program. Please check the program registration information prior to submitting your request.

#### **Requirements:**

1. Participants must live or go to school in Sandy Springs.
2. Participants must be on free or reduced lunch program in Sandy Springs public schools.
3. Participants not in public schools will be considered by Recreation & Parks staff.

#### **Programs:**

YOUTH BASKETBALL • YOUTH GYMNASTICS • YOUTH SOCCER • YOUTH TRACK • YOUTH SOFTBALL • YOUTH TENNIS • YOUTH DRAMA • YOUTH SUMMER CAMP • YOUTH ART

Limited spaces are available for designated programs. If you would like to be considered for a scholarship, please complete the scholarship request form and return it along with your proof of residency and proof of your child's free lunch status to:

**Sandy Springs Recreation & Parks Department**  
**705 Hammond Drive**  
**Sandy Springs, GA 30328**



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## Scholarship Request Form

I live in the city limit of Sandy Springs  Yes  No

I live outside Sandy Springs but my child attends a Fulton county school within the Sandy Springs city limits  Yes  No

Does your child receive free or reduced lunch  Yes  No

Childs Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parents Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ School: \_\_\_\_\_

Persons living outside and not attending a public school within the city limits of Sandy Springs will be considered by Recreation & Parks Staff.

List program that you would like your child to participate in.

Program Name	Program Date(s)	Program Time	Program Fee

\*\*\*Completion of this form doesn't guarantee approval.

I acknowledge that I have read the scholarship program information and the information provided is true to the best of my knowledge.

\_\_\_\_\_  
Parent or Guardian's Signature

\_\_\_\_\_  
Date

For office use only

Approved: \_\_\_\_\_

Date: \_\_\_\_\_

Award amount: \$ \_\_\_\_\_