

Financial Aid Application

## Financial Aid Application – BUSD Middle School

The Boys & Girls Club of Burbank and Greater East Valley is able to provide financial scholarships to those families who need it most. Financial aid comes in various denominations that will help cover the cost of the monthly fee. You will be held accountable to pay your first month's membership fee prior to the first day your child enters the program. Aid is granted to families on the basis of financial need. Each applicant must apply annually for fall and summer programming. Applications are subject to review at any time. \**Please note, if you do not have the documents listed below please contact our membership department, membership@bgcburbank.org* 

## Please SELF CERTIFY your income as stated below and submit your Free/Reduced Lunch verification and most recent W-2 to Boys & Girls Club.

CDBG GROSS ANNUAL INCOME LIMITS							
Number of People in Household/Family	Very Lov 30% and 50	Lower Income 80% of Median					
1	\$29,150	\$48,550	\$77,700				
2	\$33,300	\$55 <i>,</i> 450	\$88,800				
3	\$37,450	\$62,400	\$99,900				
4	\$41,600	\$69,350	\$110,950				
5	\$44,950	\$74,900	\$119,850				
6	\$48,300	\$80,450	\$128,750				
7	\$51,600	\$86,000	\$137,600				
8	\$54,950	\$91,550	\$146,500				

Based on the income limits reflected above, I/We, \_\_\_\_\_\_, certify my/our family(\_\_) or household (\_\_) size is \_\_\_\_\_persons, and further certify that, my/our total annual family (\_\_) or total annual household (\_\_\_) income is below the median income limits shown above [30% (\_\_\_); 50% (\_\_\_); 80% (\_\_\_)] adjusted for size of family or household. Total annual family/household income reflects all income from all sources. I/We acknowledge that the income levels I/We have certified to in this self-certification may be subject to further verification by the Boys & Girls Club, and I/We authorize such verification and will provide supporting documents if necessary.

School attending:	_ Gard Level: _	Chi	ild Name:		_
Annual Household Income before taxes:		EBT	MediCal_	SSI	
What is your monthly rent/mortgage payment?		What is	your monthly ca	ar payment?	
Parent Name:	En	nail:			
Home Address:	City:	Z	ip Code:	Phone:	
Is this application for a child currently in fost	ter care? Yes _	_ No (If y	ves, documentat	ion will be requested)	
Has your family been affected by the recent v	vildfires? Yes _	_ No (If :	yes, documenta	tion will be requested)	
The information I have provided to the Boys & Girls	Club of Burbank i ancial documentat			that I may be required to provi	de
Signature:				Date:	
All In	nformation will be	e kept confide	ntial		
	Office Use	e Only			
Executive Director: Approved Denied	d M	onthly Due:		Date:	
Staff Signature:		Membe	rship Expires or	n:	

Boys & Girls Club of Burbank and Greater East Valley – "the positive place for kids" 300 E. Angeleno Ave. \* Burbank, CA 91502 \* 818-842-9333 \* Fax 818-842-0694