
340 – Financial Aid/Scholarship Policy

1.0 PURPOSE

The Des Moines Pool Metropolitan Park District (District) understands that families and individuals due to circumstances beyond their control can experience severe financial problems. For this reason, the Financial Aid/Scholarship Program was created enabling resident to have access to the pool and programs at a reduced fee.

The District's Financial Aid/Scholarship program exists for the purpose of helping members through periods of financial hardship. Assistance is provided for residents living within the boundaries of Des Moines, WA. The amount of financial aid awarded is done through discounts of 30% for admission passes and 50%-80% for swim lessons. Once qualified, you and/or your child will be allowed to enroll in one swim lesson session per year. Eligibility is not automatic as there is limited financial aid available. Families that apply will have to comply with the requirements set forth below. Failure to do so can lead to the termination or lack of eligibility for aid. Any resident interested in this program may stop by the Mount Rainier Pool and pick up an application or download from the Mount Rainier Pool website (<https://mtrainierpool.com>). If you have any questions, please call (206) 429-3852.

The District's goal in the Scholarship Policy is to administer a Financial Aid/Scholarship program in which access to the Mount Rainier Pool and programs are available to the entire community regardless of race, color, religion, sex, national origin, age, or disability.

2.0 ELIGIBILITY

To be eligible to receive financial assistance, the applicant must meet the following criteria:

- Must be a resident of Des Moines, WA.
- Must apply for assistance in writing using the financial aid form (see attachment A) provided by the District.
- Must provide written documentation if requested by the District.
- If requested, residents must submit a copy of their most recent federal income tax return (Form 1040) and any additional income verification information required.

3.0 SCOPE OF FINANCIAL AID

The financial aid program is intended to benefit residents in temporary financial need. Financial aid may not be available for all programs or for some direct cost as determined by the District Board of Commissioners. These would include contractual programs, special events and ticket type events. The district offers two types of Financial Aid/Scholarships.

1. Facility admission pass scholarship (not to exceed 50% of pass cost)
2. Swim lesson scholarship (not to exceed 80% of lesson cost, maximum of one lesson per child per year).

The amount of aid may vary, depending on financial need, number of aid applications and money available; however, in no case shall the amount of aid to an individual exceed 50% of the pass fee or 80% of the swim lesson fee. Financial aid is awarded on a first come, first served basis and approval is dependent on space being available. The maximum amount of financial aid is \$1,000 per family, regardless of family size and \$10,000 in total District assistance per calendar year

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4.0 OTHER

1. All information on the application must be true and accurate. **Financial aid provided is legally recoverable if awarded on the basis of false information.** Any applicant who receives financial aid based upon false information, shall pay the entire amount back to the District upon demand, and shall also be responsible for the payment of all costs of collection, including attorney's fees and costs.
2. All information received will remain confidential.
3. All financial aid shall be awarded solely based upon the individual need of the applicant without regard to race, color, gender, religion or sex.

5.0 APPLICATION PROCEDURES

1. Complete the financial aid application form which is available on the Mount Rainier Pool website. Return the completed form along with all required documentation to:

Mount Rainier Pool
22722 19th Avenue South
Des Moines, WA 98198
2. Upon receipt, the Pool Supervisors and/or Executive Director will review the application and make a decision of approval/disapproval and if approved, the percentage amount of financial aid to be provided. Aid provided will be based on many factors including, but not limited to, family size, family income, other types/amounts of aid received from agencies and other extenuating circumstances. Another consideration shall be the number of applicants for financial aid.
3. Applications for financial aid will be notified within 2 weeks of receipt of completed application, including all necessary documents, as to the grant status.
4. Upon approval, applicants may register for programs through regular District registration procedures.

Financial aid is valid for one calendar year and a new application must be submitted each year.

Attachment A**Des Moines Pool Metropolitan Park District
Admission Pass and Swim Lesson Scholarship Application**

NAME OF APPLICANT: _____

ADDRESS: _____ CITY: _____

PHONE: _____ APPLICANTS AGE: _____

NUMBER OF PERSONS RESIDING IN RESIDENCE: _____

Type of Financial Aid: _____ Admission Pass Scholarship _____ Lesson Scholarship

List all adult household members and indicate the amount and source of MONTHLY INCOME each house member received last month. Information must be verified by two consecutive current pay stubs, or Department of Social Services income verification.

<u>Last Name</u>	<u>First Name</u>	<u>Gross Monthly Earnings*</u>	<u>Any Other Monthly Income</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Total Annual Household Income: _____

Additional Information: Please include any information which would help us in considering this application. _____

VERIFICATION: The information on the application may be checked by the Des Moines Pool Metropolitan Park District at any time. You may be asked to provide documentation to prove your income or current eligibility.

I certify that all of the above information is true and correct and that all income is reported. I understand that this information is given for the consideration of a swim scholarship.

Date: _____

Signature of Applicant or Parent/Legal Guardian Date

(For Office Use Only)

The above application: _____ Meets _____ Does not meet the guidelines set in the Scholarship Policy.

Application approved by _____ Date: _____

Applicant notified by: _____ Date: _____

Percentage of Financial Aid Approved: (30% admissions) (50% lessons) (80% lessons) Lesson or

Pass Amount Cost: _____ Amount of Aid Credit \$ _____