**ELITE BOXING YOUTH CHAMPS, INC.**
**Scholarship & Financial Assistance Application**

Program Year: _____

**1. APPLICANT INFORMATION**

Participant Name: _____

Date of Birth: _____ Age: _____

Parent/Guardian Name (if under 18): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

**2. HOUSEHOLD INFORMATION**

**Number of People Living in Household: _____**

**Number of Dependent Children: _____**

**Total Annual Household Income**

☐ Under $25,000

☐ $25,001 – $40,000

☐ $40,001 – $60,000

☐ $60,001 – $80,000

☐ Above $80,000

**3. FINANCIAL ASSISTANCE ELIGIBILITY & SUPPORTING DOCUMENTATION**

**Please check any that apply:**

☐ SNAP/Food Assistance

☐ Medicaid

☐ SSI/Disability Benefits

☐ Housing Assistance

☐ TANF/Public Assistance

☐ Unemployment Benefits

☐ Foster Care Placement

☐ Military Family

☐ Other: _____

**Please provide ONE of the following:**

☐ Most Recent Federal Tax Return (Form 1040)

☐ Two Most Recent Pay Stubs

☐ Benefit Award Letter

☐ Proof of Participation in an Assistance Program

☐ Signed Self-Certification of Income

☐ Other Documentation Approved by Elite Boxing Youth Champs, Inc.

**4. SCHOLARSHIP REQUEST**

**Scholarship Type**

☐ New Application ☐ Renewal Application

**Program Requested**

☐ Junior Boxing

☐ Youth Boxing

☐ AM Boxing

☐ Art of Boxing Showcase

☐ Other: _____

**Assistance Requested**

☐ Registration Fee Assistance

☐ Monthly Tuition Assistance ☐ Both Registration Fee and Monthly Tuition Assistance

**Family Contribution**

Please indicate the amount your family can reasonably contribute toward program costs.

**Registration Fee You Can Pay:** $_____

**Monthly Tuition You Can Pay:** $_____

**Important**

Scholarship funds are limited and are intended to assist as many families as possible. Please indicate the amount your family can realistically contribute. Scholarship awards are determined based on demonstrated financial need, available funding, and program participation requirements.

**5. STATEMENT OF NEED**

Please explain why you are requesting scholarship assistance:

## 6. SCHOLARSHIP RECIPIENT RESPONSIBILITIES

To remain eligible for scholarship assistance, recipients agree to:

☐ Maintain a minimum attendance rate of **10 out of 12 scheduled classes per month.**

☐ Follow all gym rules and the Elite Boxing Fitness Center Code of Conduct.

☐ Demonstrate good sportsmanship and respect toward coaches, staff, volunteers, and fellow athletes.

☐ After receiving scholarship assistance for one (1) month, scholarship recipients ages **12 and older** must volunteer for a minimum of **8 Junior Boxing classes per month.**

**Junior Boxing Volunteer Schedule**

**Monday, Wednesday, and Friday**

**5:00 PM – 5:45 PM**

Failure to meet attendance, volunteer, or conduct requirements may result in scholarship review, reduction, suspension, or termination of scholarship assistance.

## 7. CONFIDENTIALITY & CERTIFICATION

**Confidentiality Statement**

All information submitted with this application will be kept confidential and used solely for determining eligibility for scholarship assistance.

**Certification**

☐ I have read and understand the scholarship requirements, attendance requirements, volunteer expectations, and the Elite Boxing Fitness Center Code of Conduct.

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that providing false or misleading information may result in denial or termination of scholarship assistance.

**Applicant Signature: _____**

**Date: _____**

**Parent/Guardian Signature (if under 18): _____**

**Date: _____**

**8. OFFICE USE ONLY**

**Date Received: _____**

**Application Review**

☐ Application Complete ☐ Documentation Verified

**Scholarship Approval**

☐ Approved ☐ Denied

**Registration Fee Assistance**

Registration Fee Amount: $_____

**Scholarship Award:**

☐ 25%

☐ 50%

☐ 75%

☐ 100%

☐ Other: _____ %

**Scholarship Amount:** $_____

**Participant Responsibility:** $_____

**Monthly Tuition Assistance**

Monthly Tuition Amount: $_____

**Scholarship Award:**

☐ 25%

☐ 50%

☐ 75%

☐ 100%

☐ Other: _____ %

**Scholarship Amount:** $_____

**Participant Responsibility:** $_____

**Program Approved For**

**Scholarship Term**

Scholarships are awarded for a period of **three (3) months** and are subject to review for renewal based on attendance, volunteer participation, conduct, and available funding.

**Approved By: _____**

**Title: _____**

**Date: _____**

**Mission Statement**

*Elite Boxing Youth Champs, Inc. is committed to ensuring that financial hardship does not prevent youth from participating in our boxing, fitness, mentorship, and character-development programs.*

# Elite Boxing Fitness Center - Code of Conduct

As a Member of Elite Boxing Fitness Center, I promise and agree that:

1. I will not engage, nor encourage anyone else to engage, in unsportsmanlike conduct, including the use of profanity.

2. I will not engage in any sexual abuse, emotional abuse, physical abuse, harassment, bullying, stalking, hazing, or similar misconduct towards anyone.

3. I will not engage, nor encourage any boxer to engage, in any behavior that would endanger the health, safety, or well-being of anyone, including boxers, coaches, volunteers, spectators, or EBFC staff.

4. I will treat all coaches, boxers, volunteers, spectators, and EBFC staff members with respect, regardless of race, creed, color, national origin, gender, gender identity or expression, sexual orientation, or ability.

5. I will not engage, nor encourage anyone else to engage, in verbal or physical threats or abuse aimed at any coach, boxer, volunteer, spectator, or EBFC staff member.

6. I will not knowingly state inaccurate or misleading information about EBFC on social media.

7. I will respect the property of others, whether personal or public, and will not damage or take anything that doesn't belong to me.

Participant Name: _____

Parent/Guardian Name (if under 18): _____

Participant Signature: _____ Date: _____

Parent/Guardian Signature (if under 18): _____ Date: _____

DISCIPLINE. RESPECT. FOCUS. EXCELLENCE.