



NEVADA RURAL COMMUNITY PARTNERS' MISSION IS TO HELP PROVIDE LIFE ENHANCING EXPERIENCES THROUGH SPORTS, ACTIVITIES AND EVENTS, TO THOSE WHO WOULD NOT OTHERWISE HAVE ACCESS TO THE OPPORTUNITY.

"A Place to Shine" **Scholarship Application**

Nevada Rural Community Partners is a non-profit organization established in 2005. As of 2016 we've started "A Place to Shine" Scholarship Fund, monies from which are made available through an annual fundraiser Show & Shine, raffles and donations. Scholarships can be used for the costs of sport/activity equipment, participation, camps and sports clinic/physicals.

Eligibility Requirements:

- Applicant must complete scholarship application with parent/guardian and coach/coordinator signatures.
- Applicant must submit completed scholarship application at least 3 weeks prior to enrollment deadline with an invoice from organization. You may submit scholarship application and invoice via mail, fax or email.
- Applicant must reside in rural Nevada. Washoe and Clark County are excluded.
- Applicant must be between 5-18 years of age
- Applicant family income must not exceed 30% area median income (AMI). See chart on reverse side.
- Applicant must commit to attend a minimum of 80% of the scheduled practices, games, lessons or workshops.
- Applicant must not be directly related to any NRCP board members.

Scholarship Policy:

- Scholarship limit will be \$300.00 but not to exceed \$1000.00 per extra-curricular activity.
- If the terms of the scholarship are violated, applicant will not be eligible for a future scholarship for 1 year/season from date of scholarship issuance. In the case of extenuating circumstances, each case will be reviewed by the board on a case by case basis (ex: death in family)
- If the applicant violates the terms of the scholarship application 3 times, the applicant will no longer be eligible for future scholarships though Nevada Rural Community Partners.

Scholarship Procedures:

- Applications will be processed in the order they are received with date and time stamp. First come, first serve basis as funds are limited.
- Applicants who have been selected as recipients of the scholarship will be notified via phone, mail or email.
- Payment will be made payable and sent directly to the organization providing the extra-curricular activity.
- All communications concerning applications or scholarships must be made via email at NRCP.NonProfit@gmail.com or in writing to Nevada Rural Community Partners reference **APTS-SA**. No communication from the Foundation will be considered effective unless signed by the President or Vice President. Please do not telephone the office for information concerning applications or scholarships.
- An NRCP board member will contact the organization providing the extra-curricular activity to verify that the applicant has met and completed the requirements.

Please let us know how you heard about the "A Place to Shine" scholarship fund.

Family/Friend Referral Social Media Word of mouth Other: _____

APTS-SA 9/27/17 JT



3695 Desatoya Drive Carson City, NV 89701
F: 775-887-1798 • NRCP.NonProfit@gmail.com
This institution is an equal opportunity provider.



Income Limits for “A Place to Shine” Scholarship

NEVADA 30% AMI

Number of Persons in Family

	1	2	3	4	5	6	7	8
Carson County	14,750	16,850	20,780	25,100	29,420	33,740	38,060	42,380
Churchill County	14,750	16,850	20,780	25,100	29,420	33,740	38,060	42,380
Douglas County	15,050	17,200	20,780	25,100	29,420	33,740	38,060	42,380
Elko County	17,500	20,000	22,500	25,100	29,420	33,740	38,060	42,380
Esmeralda County	14,750	16,850	20,780	25,100	29,420	33,740	38,060	42,380
Eureka County	18,450	21,505	23,700	26,300	29,420	33,740	38,060	42,380
Humboldt County	16,150	18,450	20,780	25,100	29,420	33,740	38,060	42,380
Lander County	17,400	19,850	22,350	25,100	29,420	33,740	38,060	42,380
Lincoln County	14,750	16,850	20,780	25,100	29,420	33,740	38,060	42,380
Lyon County	14,750	16,850	20,780	25,100	29,420	33,740	38,060	42,380
Mineral County	14,750	16,850	20,780	25,100	29,420	33,740	38,060	42,380
Nye County	14,750	16,850	20,780	25,100	29,420	33,740	38,060	42,380
Pershing County	14,750	16,850	20,780	25,100	29,420	33,740	38,060	42,380
Storey County	15,450	17,650	20,780	25,100	29,420	33,740	38,060	42,380
White Pine County	15,100	17,250	20,780	25,100	29,420	33,740	38,060	42,380

Effective 4/1/18



"A Place to Shine" Scholarship Application

Office Use Only	
Amount of Request \$	_____
Date Received	_____
_____ Approved	_____ Denied
Signature of President/VP _____	
Distribution Date _____	
Follow up: Completed ___ Yes ___ No	
Initials of Board Member: _____	

Student's Information:

First Name: _____ MI _____ Last Name: _____
 Date of Birth: _____ Age: _____ Gender: Male Female
 School: _____ Grade: _____

Parent/Guardian's Information:

First Name: _____ Last Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Daytime Phone: _____ E-Mail Address: _____

Household Size: _____ Annual household income \$ _____

1. Which extra-curricular activity is your child interested in playing?

- _____
- a) Organization Name _____
 - b) Organization Address _____
 - c) Coach/Advisor/Coordinator Name _____
 - d) Phone Number _____ Email _____

2. Which season is your child registering to play?

- Spring Summer Fall Winter Other _____

3. Which type of assistance are you requesting?

- Registration Fees Cost \$ _____
 Equipment: _____ Cost \$ _____
 Other: _____ Cost \$ _____

Please explain: _____

4. What's the maximum amount you can pay towards costs? \$ _____**5. Please explain your request/circumstances:**

Consent to exchange information I understand information may be needed to verify eligibility for this program and to coordinate services with other agencies; therefore, I agree that agencies may share my child's information. I certify that the information supplied is true and correct and that NRCP staff have my permission to verify the information on this application. I understand that my child's participation in this program requires a commitment to attend a minimum of 80% of the scheduled practices, games, lessons or workshops.

Signature of Parent/Guardian

Date

Signature of Coach/Advisor/Coordinator

Date

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