



CITY OF MARLBOROUGH RECREATION DEPARTMENT

239 Concord Road
Marlborough, Massachusetts 01752
Tel (508) 624-6925 FAX (508) 624-6940 TTY (508) 460-3610

COMMISSIONERS
Brenda Calder
Nancy Klein
Robert Kays: Chairman
Mark Vital

DIRECTOR
Charles Thebado

PROGRAM MANAGER
Zachary Lambert

What is a scholarship?

A scholarship is a reduced rate or fee assistance for Recreation programs and activities based on financial need. Program fees may be discounted 25%, 50% or 75%. The Marlborough Recreation Department is dedicated to offering affordable recreation programs at low costs to residents in order to define and increase quality of life. This scholarship fund has been set up to provide partial subsidies to eligible citizens for selected programs, as funds are available.

Scholarships apply to most programs with the following exceptions:

- Facility/field fees
- Late fees
- Some programs where an independent contractor is used
- Program fees of \$10 or less

Who can receive a scholarship?

Scholarships are available to City of Marlborough residents only. Discounts are based on the number of immediate family members in the household and their combined income from all sources.

Where do Scholarship funds come from?

Scholarships are provided by the City of Marlborough and local businesses and organizations.

How to apply

1. Complete the application form on the second page of this document.
2. Attach or bring a copy of your most recent tax return. *Director cannot approve scholarship applications without proper documentation.*
3. Attach supporting documentation. (Paystubs, W2's, etc.)
4. Mail, email or drop off information to:
Marlborough Recreation Department
239 Concord Road
Marlborough, MA 01752
Email: zlambert@Marlborough-ma.gov
5. Applicants will be notified after director review.
6. Throughout the calendar year, the Recreation Department is involved in a wide range of city events. In lieu of a scholarship, the Recreation Department is asking each recipient to volunteer three hours for a city event. (*i.e. Labor Day Parade, Home for the Holidays, Movie Nights, etc.*)



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APPLICATION FOR SCHOLARSHIP

(Please print clearly)

Applicant Name _____	Date _____
Address _____	
Home Phone _____	Work Phone _____
E-mail _____	
Participant Name(s) _____	Age(s) _____ Grade(s) _____
Program requested for financial assistance _____	

Total Household Gross Income—You must tell us how much and how often. Please Note all financial information will be confidential.

1. Name (List everyone in household)	2. Gross income and how often it was received				3. Check if NO income
	Example: \$100/monthly	\$100/twice a month	\$100/every other week	\$100/weekly	
	Earnings from work before deductions	Welfare, child support, alimony	Pensions, retirement, Social Security	All Other Income	
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>
	\$ ____/____	\$ ____/____	\$ ____/____	\$ ____/____	<input type="checkbox"/>

Statement of Need: Please state the circumstances you feel qualifies you for the scholarship program. Explain why paying for the above program creates a hardship. Please indicate which Recreation Program you would like to receive assistant for.

Signature

I certify (promise) that all information on this application is true and that all income is reported.

Sign here: _____ Print name: _____ Date: _____