



River City Promise Program - Financial Assistance Application

Please complete the following application and submit all necessary forms to apply for financial assistance.

Contact Information

Name of person completing application *

First Name

Last Name

Relationship to Player *

E-mail Address *

Phone Number

Area Code

Phone Number

Player Information 1

Players Name *

First Name

Last Name

Players Date of Birth *



Gender

Male

Female

River City FC Team

Player Information 2

Players Name *

First Name

Last Name

Players Date of Birth *



Month

Day

Year

Gender

Male

Female

River City FC Team

Financial Information

Must be completed and supporting financial documents must be submitted in order to be considered for financial aid awards.

Total Gross Annual Household Income, from all source derived *

Parent Information

Parent 1 Name

First Name Middle Name Last Name Suffix

Parent 1 Phone Number

Area Code Phone Number

Parent 1 Occupation *

Parent 1 Employer

Parent 1 Annual Salary *

Parent 1 Other Income

Including child support, alimony, governmental assistance, etc

Parent 2 Full Name *

First Name Middle Name Last Name Suffix

Parent 2 Phone Number *

Area Code Phone Number

Parent 2 Occupation *

Parent 2 Employer

Parent 2 Annual Salary *

US Dollars

Parent 2 Additional Income

Including child support, alimony, governmental assistance, etc

With Whom Does The Player Live? *

Both mother & father

Mother

Father

Parents are *

Married

Divorced

Seperated

Please list the number and ages of any other dependent children in the home:

Do you rent or own your home? *

Rent

Own

Please share your story and any additional information that will help in determining your need for

financial assistance:

Upload of Required Financial Documents

Please note that this information is verified for award purposes and then destroyed. ***For security purposes, please obscure social security numbers***

Before continuing, the following information is REQUIRED and must be submitted with your application for EACH parent/guardian listed above:

(for security purposes, please obscure social security numbers)

Copy of most recent pay stub AND

Copy of most recent year's signed Federal Income Tax Return (Form 1040 or 1040EZ)

If you are unable to include a copy of your most recent pay stub for each parent/guardian, please provide additional explanation. Please note, this information must be supplied in order to receive financial assistance.

If you are unable to include a copy of your most recent Federal income tax return, please provide additional explanation. Please note, this information must be supplied in order to receive financial assistance.

Certify and Submit

Certification

I, hereby, certify that the information provided in this application is accurate and complete to the best of my knowledge. I understand that any misrepresentation of the information herein may result in the denial of financial assistance.