



The United Sports Foundation Emma's Grant – Financial Aid Development Academy Travel Expenses



All information must be completed in order to be considered for assistance from the United Sports Foundation. Financial aid requests will not be considered if there is an outstanding balance on the family's account. Please be aware that families receiving assistance will be required to give 5 hours of service at Seacoast United events or 5 hours of service for United Sports Foundation in exchange for the scholarship. Award determinations will be made after registration fees are paid and/or a payment plan is set up.

Player Information (submit one form for each player):

Player Name _____
 Home Address _____
 City _____ Zip _____ Phone _____
 Email address _____

Age Group (birth year) _____ and U- _____

Coach Name: _____ You are required to submit a letter from your coach or DA Director of Coaching recommending you for this scholarship based on your character and the importance of your attendance to this specific showcase event.

Father's Name _____
 Mother's Name _____
 Marital status _____

List ways you can complete your 5 hours of volunteer community service for United Sports Foundation or Seacoast United Sports Club (if you receive an award you will be contacted to schedule):

Name of Showcase Event: _____ Dates of the Showcase Event: _____
 Published Cost of Showcase Event: _____
 Anticipated Additional Expenses: _____
 Requested Amount: _____

Total Amount of Aid from United Sports Foundation, US Development Academy Scholarship program and/or Seacoast United Sports Club for the Current Season (Including Reduction in Tuition): _____

Itemized Yearly Income: Father's Annual Salary: \$ _____ (first adult living in house)
 Mother's Annual Salary: \$ _____ (second adult living in house)
 Alimony: \$ _____
 Child Support: \$ _____
 Other Income: (Social Security Income, Food Stamps, Unemployment, Disability, Pension, trust funds, etc.): \$ _____
 Total Gross Income: \$ _____

You **MUST** provide prior year federal tax return and all of the following documents that are relevant with your application along with a note from the club registrar as to your financial standing at this time.

Please list any special circumstances that may contribute to your request for financial assistance on separate sheet and attach to this form including what you are hoping to gain from this experience. Incomplete applications will NOT be processed or considered. I certify that the above information is accurate and truthful.

Signature _____ Date: _____