

## Sharon Recreation Department

219 Massapoag Ave., Sharon, Massachusetts 02067 Phone: 781-784-1530 Fax: 781-784-1532 Web: www.sharonrec.com

## **FINANCIAL AID REQUEST FORM**

Please fill in all requested information. Assistance in completing the application is available at the Sharon Recreation Department office. Any forms that are not completely filled out will NOT be accepted. NOTE: Income information MUST be supplied on ALL persons living in the household who are 18 years old or older (whether related to you or not).

Name:	Date:
Address:	
Home Phone:	
Email:	
Number of Members in Household:	Annual Household Income:
Name of Person Applying for:	
Program(s) Applying for (please list all):	_
Program scholarships are funded by the Michael C. Rothber Sharon Recreation Department uses the HUD (U.S. Departm ly determine financial aid.	g Foundation. They are intended to benefit low income residents. The nent of Housing and Urban Development) income guidelines to proper-
"Whoever, in any matter within the jurisdiction of the execut States, knowingly and willfully falsifies, conceals, or covers ally false, fictitious, or fraudulent statement or representation	tive, legislative, or judicial branch of the Government of the United up by any trick, scheme, or device a material fact, or makes any materian, or makes or uses any false writing or document knowing the same to not or entry shall be fined not more than \$10,000, imprisoned not more
The below named applicant certifies that all information in Verifications may be obtained from any source named here	n this application is true to the best of his or her knowledge and belief. ein.
Applicant Signature:	Date:
*PLEASE ATTACH YOUR MOST RECEN	NT IRS 1040 FORM ALONG WITH THIS SHEET*
FOR OFFICE USE ONLY	·  