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IDA PUBLIC SCHOOLS

Extra-Curricular Activity Participation Fee
Scholarship Application



All information j	provided is confidential. The privacy of the	d reduced lunch guidelines. applicant is strictly observed.
Name of Student	Building	g
Activity/Sport	Year/Season / 🗖 Fall	□ Winter □ Spring
Total household's month wages, Social Security, P	ly income from all sources including ublic Assistance, etc.	ş
Total number of persons	in the household	
I verify that the above	information is correct to the best of r	ny knowledge.
Signature of Pare	nt or Guardian	Date
	DETERMINATION OF QUALIF	<u>ICATION</u>
Approved F		
Approved F		
Approved For Signature of Build	ull 🗖 Approved Partial 🗖	Not Approved
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Approved For Signature of Build	ull Approved Partial ding Administrator PARENT NOTIFICATIO Building	Not Approved Date Not Approved

Signature of Building Administrator

Date

(Questions regarding this application should be directed to the appropriate building administrator.)