

YEP Youth Empowerment Program

Terms, Conditions & Expectations

Overview: Our mission at YEP is to help as many children in our community as possible who are at-risk or in economically disadvantaged situations. We know it can be challenging to afford extracurricular activities. We believe that participation in active activities or other empowerment outlets can benefit a person tremendously by helping them to understand discipline, focus, selfcontrol and other life skills. It helps kids gain confidence. We also teach strategies to deal with bullies, violence, stress management and can give them tools to help combat obesity. Our goal is to provide funds to families, ideally YEP pays 50% and the applicant contributes 50%.



Terms, Conditions & Expectations: The YEP Scholarship Program helps to subsidize a child's activities. There may be additional need for the costs of uniforms, or equipment. Scholarships are given based upon financial need and can vary from child to child or family to family. There are only a limited number of scholarships available and based on funding, so it is extremely important that you read, understand, *and agree* to the following:

- 1.) Scholarships are given on a basis- by-basis. If your child (on scholarship) is going to take up a slot in class (sizes are limited), we expect your child to attend their classes regularly for the entire season or set out time frame. We do review the attendance and your child will be expected to maintain around 70% attendance in their classes/ activities. Students who consistently fall below 60% attendance may be dropped from the program. If you or your child decides to "take time off" or stop training or attending for any reason (sometimes this is to participate in a sport or other activity) prior to the end of set time frame, the student may lose the scholarship, their slot in class, and may be denied access to a scholarship in the future. We encourage parents to have a serious conversation with the child regarding the commitment required to maintain their scholarship status.
- 2.) The maximum benefit amount is 80% of the total requested per applicant. The student/ (parent) would be responsible for the remaining balance. If unable to come to come up with the remaining balance, then there will be some fundraiser suggestions. Everything is depending on individual need.
- 3.) In order to help us determine financial need, the following documents are required BEFORE a Scholarship will be approved:
 - a. A copy of the family's *last year tax returns* or
 - b. The previous 1 *months of pay stubs* for all income earners in the family or
 - c. One Month's Bank Statement
 - d. Document of any public assistance

Please **black** out any personal information such as SS# or Bank account #s.

Scholarship Application



Application Date _____

Student's Name _____

Date of Birth _____

Address/ State/Zip _____

E-mail Address _____

Are you on Facebook? Y N

Sport/activity applying for _____

Name of Company offering the sport/activity: _____

Costs: _____

Can you pay 50%? _____

How much are you needing YEP to help with: _____

GET YOUR YOUTH INVOLVED IN THE PROCESS.

Story Telling!! You can use any medium wanted for example letter/words, audio recording, video, power-point, singing a song or through art or a combination. It can be simple or more in-depth.

Items to include:
Tell us your story/ applicant story.
What kind of activity are you wanting to take part in?
How will doing this activity/sport help you?
Why should you be given the funding?

Student Resides With: _____ Mother _____ Father _____ Both Parents _____ Grandparents

_____ Relative _____ Foster Parent _____ Other _____

Parent/Guardian Name(s) _____ Phone () _____

Are you (the Parent/Guardian) presently employed? Y N

Place of Employment _____ Work Phone () _____

Monthly Income

Wages, salaries and tips:* \$ _____

Unemployment \$ _____

Social Security \$ _____

Child Support \$ _____

Public Assistance: \$ _____

SNAP: \$ _____



Monthly take-home Pay \$ _____ Family Annual Income \$ _____

Number (and Ages) of Dependents _____

Assets:

Assets consist of the following:

Bank Accounts – including Checking and Savings Accounts, Certificates of Deposit, Bonds, Stocks, Money Market Accounts, other: _____

Cash on hand \$ _____

*If your income is zero please note how you are paying your monthly expenses.

Obligations:

Outstanding debts and obligations are as follows:

Type:	Monthly Payment	Outstanding Balance	Market Value
Home Mortgage	\$ _____	\$ _____	\$ _____
Car Loan(s)	\$ _____	\$ _____	\$ _____
Credit Card Debt	\$ _____	\$ _____	
Other: _____	\$ _____	\$ _____	

Are you receiving financial counseling to help improve your situation? Y N

Do you believe that your financial position will improve within the next year? Y / N

Have you read the Terms, Conditions, and Expectations for the YEP Scholarship Program? Y / N

Are you able afford half of the amount needed? Y / N

If not, how much is the *maximum* you can afford to contribute toward the fees?

\$ _____

To **Process** your application, we will need some items for you to qualify you.

- e. A copy of the family's *last year tax returns* or
- f. The previous 1 *month of pay stubs* for all income earners in the family or
- g. One Month's Bank Statement
- h. Document of any public assistance

Submit

You can email everything to info@royalrealty.co and april@royalrealty.co then text yepappemailed to 406-661-2325

We will be calling you to schedule a phone or in person meeting. Please allow up to 7-15 days to process your application, sometimes faster. We are on a 100% volunteer basis. If you have questions or want to check on status, email us at info@royalrealty.co or april@royalrealty.co or text 406-661-2325.

Thank You

We encourage all YEP recipients to send in a Thank You card to YEP while they are doing the sponsored sport or following the sponsorship. Send to Attn: YEP! at 1145 Grand Ave Billings MT 59102.

Information in this section is for reporting purposes only and has no bearing on the acceptance or rejection of an application.

Demographic Information:

Gender: _____ Male _____ Female

Ethnicity: _____ Asian/Pacific American _____ Caucasian/European American

_____ African American _____ Bi/Multi-Racial _____ Latino/Hispanic

_____ Native American _____ Other/Not Listed

Thank you for taking the time to complete the application! We are excited to review and see how we can help! YEP!

For the Parent/Guardian to complete:

I consider this child to be considered at-risk due to the following reasons (check all that apply):

Academic Failure Excessive School Absences Substance Abuse
 Teen Pregnancy Negative Peer Groups Alcohol Abuse
 Gang Involvement Domestic Violence Problem Behavior
 Economic Deprivation Family History of Drug and/or Alcohol Abuse
 Parent Incarcerated High rate of neighborhood crime
 Lack of Bonding, prefers to be alone Other _____
 Mental / Physical Impairment (Explain) _____

Would you like to volunteer at YEP? Yes or No

I verify that all the information submitted is correct, complete and accurate. If my situation changes, I agree to notify YEP within 10 days of having the knowledge. I understand that I have to re-apply after each sponsorship. If I submit false or inaccurate information, or fail to notify YEP of any changes within 10 days, I may be disqualified from the sponsorship program at YEP. YEP reserves the right to refuse financial assistance to any applicant. I declare that I have answered the above questions to the best of my knowledge and belief, and that each and all are true and correct. I have read the Terms, Conditions and Expectations (hereafter, Terms) of the YEP Scholarship Program and I agree to abide by them as stated.

 Student Printed Name Parent/Guardian Signature Date Signed

Notes or questions: _____

