

Town of Weymouth,  
Massachusetts

Recreation Division  
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Weymouth, MA 02189  
Telephone: 781-682-6124  
Stephen Reilly  
Director



MAYOR  
Robert L. Hedlund  
75 Middle Street  
Weymouth, MA 02189-1360  
781-335-2000  
781/331-5124 (TTY)

## 2023 WEYMOUTH RECREATION SCHOLARSHIP APPLICATION

Weymouth Recreation scholarships are funded through the Town of Weymouth Community Services Fund & are only awarded to the Town of Weymouth residents. Donations to this fund also support the Youth and Family Division Christmas Drive. Funds are limited and not guaranteed. It is highly recommended to submit the application to the Recreation Department as early as possible. **Applications must be filled out completely with all required documentations and signatures. Incomplete applications will not be processed.** Scholarships are for children ages 3-15 and will be applied as a household credit on Weymouth Recreation Household Accounts. A maximum of \$215.00 per child and/or a maximum of \$540.00 per family household will be awarded.

Scholarship applications will be accepted from March 1 - August 11. Awards are valid through December 22, 2023. Scholarships are restricted to residents of Weymouth. Applicants must have a Weymouth Recreation Household account in order for scholarships to be processed. Scholarship may take up to two weeks to be processed and awarded. Notification of award is via email.

**\*\*Unpaid balances from prior camp years will disqualify applicants from scholarship eligibility\*\***

### Parent / Guardian Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: Weymouth State: MA Zip: \_\_\_\_\_  
Phone #: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

### List all children requesting a scholarship:

Child's Name \_\_\_\_\_ Address \_\_\_\_\_ D.O.B \_\_\_\_\_ Age as of June 1, 2022 \_\_\_\_\_  
Child's Name \_\_\_\_\_ Address \_\_\_\_\_ D.O.B \_\_\_\_\_ Age as of June 1, 2022 \_\_\_\_\_  
Child's Name \_\_\_\_\_ Address \_\_\_\_\_ D.O.B \_\_\_\_\_ Age as of June 1, 2022 \_\_\_\_\_  
Child's Name \_\_\_\_\_ Address \_\_\_\_\_ D.O.B \_\_\_\_\_ Age as of June 1, 2022 \_\_\_\_\_

**Proof of Need:**

**Please answer the following question AND provide documentation:**

1. Does your child(ren) qualify for reduced or free lunch in his/her school?  
**Yes No School:** \_\_\_\_\_ **IF YES**, please list the school(s) **and** provide a confirmation letter from the school indicating such for the 2022/23 school year.
2. Please provide a minimum of two (2) different documentations of aid received within the last 6 months.  
**Examples:** Unemployment Benefit statement, Home Energy Assistance, Low Income Housing Rental agreements, SNAP Benefit Card, Layoff Notice, Lockout Letter, WIC etc.

**PENALTY FOR FALSE OR FRAUDULENT STATEMENT - U.S.C. Title 18, Section 1001**

“Whoever, in any matter within the jurisdiction of any department or agency or the United States knowingly and willfully falsifies or makes any false, factitious, or fraudulent statements or representations, or makes use of any false writing or document knowing the same to contain false, fictitious, or fraudulent statements or entry, shall be fined not more than \$10,000; or imprisoned not more than five years; or both.”

**Privacy Act Statement**

The information that you will be requested to provide as part of your application will be used to determine your eligibility. Although voluntary, failure to furnish any of the requested information may result in rejection of your application. This information may be disclosed to your employer for employment and wage verification; but to no other parties except as permitted by law.

The below named applicant certifies that all information in this application is true to the best of his or her knowledge and belief. Verifications may be obtained from any source named herein.

Applicant Printed Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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*Office use only:*

*Date Received* \_\_\_\_\_ *Initials* \_\_\_\_\_  
 *Resident Confirmation* \_\_\_\_\_ *Initials* \_\_\_\_\_  
 *Date of Notification* \_\_\_\_\_ *Initials* \_\_\_\_\_  
 *Date Processed* \_\_\_\_\_ *Amount of Scholarship* \_\_\_\_\_ *Initials* \_\_\_\_\_