

**Oregon Trail School District**  
**Middle School Athletic/Activity Fee**  
**Financial Assistance Application**

Financial assistance may only be requested for students who are currently participating in an activity/athletic program, Forms may be submitted each season and must be received by the school office **no later than 2 weeks after the first practice or meeting**

Date \_\_\_\_\_

Student's Name \_\_\_\_\_ Male Female

Activity/Sport \_\_\_\_\_ Year: 6 7 8

Parent Phone Number \_\_\_\_\_

Parent email \_\_\_\_\_

Scholarship requests are only for school-sponsored athletics and activities and cover a maximum of 50% of the activity/athletic fee.

\_\_\_\_\_ I would like to request a scholarship for the above named Activity/Sport.

Parent statement on reason(s) for making request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_ Administrator \_\_\_\_\_ Date \_\_\_\_\_

Please send this completed form to the school office. The school will contact you to confirm acceptance/denial of this application.

Office Use Only:

Approved \_\_\_\_\_ Amount \_\_\_\_\_ Balance Due \_\_\_\_\_ Contacted Home \_\_\_\_\_

Denied \_\_\_\_\_ Staff Initials \_\_\_\_\_

