



## Scholarship Program

Giant Steps Therapeutic Equestrian Center is dedicated to making our service available to all who can benefit from adaptive riding. To begin with, we actively fundraise throughout the year to underwrite the cost of our programming so that we can charge clients well less than half of the actual cost. In addition, through donations, Giant Steps is also able to offer financial assistance to families and individuals who qualify and who could not otherwise afford the program tuition. This assistance is provided in the form of adjusted fees to those who demonstrate need.

Scholarships are based solely upon financial need, and though our policy is that no participant be turned away for lack of funds, we expect your request for a scholarship to be genuine and proven quantitatively and fairly by the inclusion of your previous year's tax return.

It is important to emphasize that scholarship funds are limited. Scholarship requests are reviewed strictly on household income and number of dependents so as to be fair. It is our goal to assist as many children and adults with disabilities as possible who need our services and not have anyone turned away due to finances.

### Process:

A Scholarship Application Form must be completed including tax-returns or supporting documentation of financial need. All information is kept confidential. Your completed application will be reviewed, and you will be contacted if we have any questions. Please keep a copy of the following scholarship policies for your records.

## Scholarship Policies

### **[Please initial next to each policy]**

\_\_\_\_\_ Scholarship recipients and/or their parents or care providers are asked to help raise a minimum of \$500 per year for Giant Steps.

OR

\_\_\_\_\_ Scholarship recipients and/or their parents or care providers are asked to volunteer to help contribute towards the program needs. Here is a list of ways you can help:

- ❖ Volunteer a minimum of one hour per week during a session. Parents/care providers are welcome to volunteer during their child's lesson.
- ❖ Volunteer for an event.
- ❖ Volunteer in the office.
- ❖ If these options aren't possible for you, please call Julie Larson at 707-781-9455 to discuss other ways to help.

AND

\_\_\_\_\_ Our schedule is at maximum capacity and we have a waitlist for students wishing to ride at Giant Steps. To ensure that everyone gets the most out of their therapeutic riding lessons we will be strictly enforcing an attendance policy for scholarship participants. Any



scholarship participant who misses more than 30% of the lessons in any one term will forfeit their scholarship. The only exception to this rule will be a doctor excused extended absence.

\_\_\_\_\_ A scholarship participant who misses a lesson and does not call ahead to cancel will be charged a \$10 “No Show” fee.

If you have any questions about the scholarship application or process, please contact the business manager at 707-769-8900.



## Scholarship Application

This application is for scholarship assistance at Giant Steps. If you think a scholarship is required, it is important that applications be completed on time and that the most current tax return is included at the time of the application. The information will be kept confidential.

Completion of an application is required annually.

Participant's Name: \_\_\_\_\_

Parents/Guardian (if applicable): 1: \_\_\_\_\_

2: \_\_\_\_\_

Please list all pertinent information:

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

E-mail Addresses: \_\_\_\_\_

Home Address, City, Zip Code: \_\_\_\_\_

\_\_\_\_\_

Occupation(s): \_\_\_\_\_

Employer(s): \_\_\_\_\_

What is your total annual net household income? \_\_\_\_\_

**You must attach a copy of your most recent tax-return and, if applicable, a copy of your SSI check.**

Is SSI your only source of income? Y\_\_\_\_ N\_\_\_\_

Has there been any change in status since you filed your tax return? Y\_\_\_\_ N\_\_\_\_

If yes, please explain: \_\_\_\_\_

Please list dependent children: \_\_\_\_\_

Please list any medical expenses that you have that are not covered by your health insurance:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I certify that all of the information provided in this document is true and correct.

Name: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_

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



## Appendix: Sample Scholarship Levels

To determine your qualification for a scholarship, we will locate your income according to the number of dependents in the chart below and follow the column down to the corresponding Participant Tuition and Scholarship amount. For example, a family with 2 dependents with an income of approximately \$55,000 would receive a 60% scholarship.

### 2022 HUD TABLE

Number of Household Dependents	Household Income (30% AMI)	Household Income (50% AMI)	Household Income (60% AMI)	Household Income (80% AMI)	Household Income (100% AMI)
1	25,000	41,600	49,920	66,550	78,950
2	28,550	47,550	57,060	76,050	90,250
3	32,100	53,500	64,200	85,550	101,500
4	35,550	59,400	71,280	95,050	112,800
5	38,850	64,200	77,040	102,700	121,800

This median income schedule is based on the median household Income for Sonoma County as determined by the United States Department of Housing and Urban Development (HUD). Household income is adjusted for family size in accordance with HUD standard adjustment factors. Effective June 15, 2022