



PO Box 1819  
Thousand Oaks, CA 91360

## Conejo Simi Aquatics Scholarship Application

**Instructions:** The parent or guardian should fill out questions 1-4 and sign. The swimmer must answer questions 5-7 and sign. As proof of financial need is required, please provide copies of School Subsidized Lunch Program. Scholarships are renewable as long as club funding is available and there is a demonstrated need. CSA has two scholarship periods, September- March and April-August. Applicants are required to re-apply for each period. You will be notified of the decision within two weeks of application receipt. Incomplete applications will not be accepted.

Mail the completed application and copies of federal lunch program vouchers to:

**Conejo Simi Aquatics**  
**P.O. Box 1819**  
**Thousand Oaks, 91360**

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1. **Child's Name:** \_\_\_\_\_  
**Phone Number:(\_\_\_\_\_)** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Your email address:** \_\_\_\_\_

2. **Reason for financial need:**

3. **What percentage of financial assistance is necessary? Circle one:**

25%

50%

75%

90%

4. **Acknowledgement:** CSA is a parent-operated, non-profit organization which relies on volunteer support from its members to operate the team. Scholarship recipient familie are expected to volunteer a minimum of 10 hours per month by actively serving on a volunteer club committee. By accepting scholarship funding, your family is agreeing to support Conejo Simi Aquatics, make every attempt to attend all practices for the scholarship period (Sept.-March/ April-Aug.), and to fulfill the volunteer requirements?

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date

5. **Why do you want to participate in swimming?**

6. **What is your grade level and GPA?** Grade:      GPA:

7. **List any other club, youth group, or organized associations in which you're a member.**

\_\_\_\_\_  
Swimmer Signature

\_\_\_\_\_  
Date