



BUSA / Alabama FC SCHOLARSHIP INFORMATION

Birmingham United Soccer Association (BUSA) and Alabama FC (AFC), as part of its mission, works to promote and develop a broad range of soccer opportunities for local youth players and their families. In an effort to provide increased opportunities for children and their families to participate in competitive soccer, BUSA/AFC offers scholarship opportunities based on a combination of need and merit to those players from families that are eligible for consideration from BUSA, Alabama FC, and BUSA Alabaster. Partial or full scholarships are available for BUSA/AFC/BUSA Alabaster competitive fees. No scholarships are available to cover uniforms or team fees, such as, tournament entry fees and coaches' travel. BUSA/AFC/BUSA Alabaster Scholarships are awarded for one year for Competitive players. Recipients are required to perform volunteer work as requested. Eligible candidates must be registered with BUSA/AFC/BUSA Alabaster.

Scholarship opportunities are intended for players from families that have a documented financial need, and therefore applicants must complete and submit a competitive scholarship application, and attach thereto a copy of the most recent pay stub and most recent year's signed Federal Income Tax Return, including any W-2's and 1099's. Information in applications will be used in determining eligible candidates for financial assistance. BUSA/AFC/BUSA Alabaster will take reasonable measures to maintain confidentiality and assure that information will not be released to third parties. BUSA/AFC/BUSA Alabaster reserves the right to request an applicant to reapply at any time, or to request additional information.

Completed scholarship applications must be received by the BUSA office prior to deadlines below. All completed applications will be reviewed and determination made within 10 days of the stated deadline below. Applications for the upcoming season must be received by:

ALL Scholarship applications are due by June 18, 2021

Once the completed application is submitted, the BUSA/AFC Scholarship committee will place the priority of consideration on the following criteria: Household Income, Families with Single Parents, Employment of Both Spouses, Extenuating medical or family hardships. The Scholarship Committee will meet to consider all applications. Written notification of approval of scholarships will be made by email.

Submission of a scholarship application will eliminate eligibility of the applicant's family from serving as a team treasurer. BUSA reserves the right to terminate a scholarship for any misrepresentation in the application.

Mail or deliver the completed application and attached financial information in an envelope marked "Confidential" to: Birmingham United Soccer Association

C/O Ivy Duggan
3576 East Street
Birmingham, AL 35243

Or submit to Ivy Duggan at ivy@birminghamunited.com



**Birmingham United Soccer Association / Alabama FC
Scholarship Application**

3576 East Street
Birmingham, Alabama 35243
Phone: (205) 977-9038
ivy@birminghamunited.com

Application Date _____

Child #1

Name: Last: _____ First: _____ Middle Initial: _____

Player's Address: Street: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ **Other Phone:** _____ **Email Address:** _____

Sex: Female Male **Birth date:** _____ **Current Team:** _____

School Currently Attending: _____ **Player's Other Activities** _____

Child #2

Name: Last: _____ First: _____ Middle Initial: _____

Sex: Female Male **Birth date:** _____ **Current Team:** _____

School Currently Attending: _____ **Player's Other Activities** _____

Child #3

Name: Last: _____ First: _____ Middle Initial: _____

Sex: Female Male **Birth date:** _____ **Current Team:** _____

School Currently Attending: _____ **Player's Other Activities** _____

If you have more than three players applying for scholarship, please notify Ivy Duggan at ivy@birminghamunited.com

Parent Information

With whom does player(s) live?

Both Parents _____
Mother _____
Father _____
Other _____

Parents are:

Married _____
Separated _____
Divorced _____
Widowed _____

Number and ages of other dependent children in the home: Number _____ Ages _____

Do you rent or own your home? _____ Rent _____ Own _____

Father's Name: _____ **Home phone:** _____

Father's Occupation: _____

Employer: _____ **Work Phone:** _____

Work Address: _____

Father's Annual Salary: _____

Mother's Name: _____ **Home phone:** _____

Mother's Occupation: _____

Employer: _____ **Work Phone:** _____

Work Address: _____

Mother's Annual Salary: _____

Other Income (including federal or state aid, child support, alimony, social security, etc.): _____

TOTAL ANNUAL INCOME: _____ **(Income information must be completed)**

The following information is required and must be submitted with your application:

- **Copy of most recent pay stub**
- **Copy of most recent year's signed Federal Income Tax Return including W-2's and 1099's**
- **Paperwork will be accepted without visible social security numbers. For Security purposes, please feel free to obscure social security numbers**

PLEASE LIST ANY SPECIAL CIRCUMSTANCES THAT CONTRIBUTE TOWARD YOUR NEED FOR FINANCIAL ASSISTANCE (PLEASE NOTE THAT THIS INFORMATION MAY BE IMPORTANT IN ASSESSING YOUR ELIGIBILITY FOR ASSISTANCE):

References

Please list two personal references (employer, religious leader, teacher, principal, etc.)

1. **Name:** _____
Last First Mr. /Mrs. /Ms.

Address: _____
Street City/State/Zip

Relationship: _____ **Phone:** _____

2. **Name:** _____
Last First Mr. /Mrs. /Ms.

Address: _____
Street City/State/Zip

Relationship: _____ **Phone:** _____

Checklist and Certification

Have you included a copy of your most recent pay stubs for each job and each parent/guardian?

Yes_____ No_____

If No, please provide explanation:

Have you included a copy of your signed most recent tax return for both parents including all W-2's and 1099's?

Yes_____ No_____

If No, please provide explanation:

Other Notes (Additional Information for the Scholarship Committee to consider) :

Incomplete applications will be returned for completion or could result in a denial of scholarship.

I hereby certify that the information provided in this application is accurate and complete to the best of my knowledge, and I understand that any misrepresentation of the information herein may result in denial of the scholarship requested. Upon acceptance of financial assistance, I agree to assist BUSA/AFC with volunteer work as requested. I fully understand that should my employment or financial position change that I will notify BUSA/AFC of such changes. I also agree that should partial financial aid be granted, I will be responsible for paying the remainder of required amounts for playing Soccer with BUSA/AFC. I understand that this assistance does not cover the cost of other fees such as tournament entry fees, coaches' travel, and uniforms.

Signature of Parent or Guardian: _____ **Date:** _____