

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 / Alabama FC / 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 reserves the right to request an applicant to reapply at any time, or to request additional information if applications are incomplete or do not present a clear picture of financial aid need.

Completed scholarship applications must be received by the BUSA office prior to deadlines below. All completed applications will be reviewed and determination made within 14 days of the stated deadline below. Applications for the upcoming season must be received by:

ALL Scholarship applications are due by June 16, 2025

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



Birmingham United Soccer Association / Alabama FC Scholarship Application

3576 East Street Birmingham, Alabama 35243 Phone: (205) 977-9038 ivy@birminghamunited.com						
Application Date						
<u>Child #1</u>						
Name: Last:	First:	Mid	Middle Initial:			
Player's Address: Street:		City:	State:Zip:			
Home Phone:	Other Phone:	Email Address	Email Address:			
Sex: Female Male	Birth date:	Current Team:				
School Currently Attending:		Player's Other	Player's Other Activities			
Child #2		Mid	dle Initial:			
Sex: Female Male	Birth date:	Current Team:				
School Currently Attendin	g:	Player's Other	r Activities			
<u>Child #3</u>						
Name: Last:	First:	Mid	dle Initial:			
Sex: Female Male	Birth date:	Current Team:				
School Currently Attending:		Player's Othe	r 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?	Parents are:		
Both Parents	Married		
Mother	Separated		
Father	Divorced		
Other	Widowed		
Number and ages of other dependent children i	in the home: NumberAges		
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, chil	d support, alimony, social security, etc.):		
TOTAL ANNUAL INCOME:	(Income information must be completed)		
The following information is required an	nd must be submitted with your application:		
• Copy of most recent pay stub			
	ederal Income Tax Return including W-2's and		
	ut visible social security numbers. For Security		
purposes, please feel free to obscur	• •		
PLEASE LIST ANY SPECIAL CIRCUMSTANCES THAT CONTRIBUTE TOWARD YOUR NEED FOR			
	AT THIS INFORMATION MAY BE IMPORTANT IN		
×			
ASSESSING YOUR ELIGIBILITY FOR ASSISTA	ANCE <u>J.</u>		

References

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:	

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

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: _____

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