

May 8, 2024

#### Dear Santa Monica Youth Program Participant:

The new Financial Assistance package for participation in CREST's after-school programs, Community Aquatics swim lessons, Community Classes, and school break camps is now available. A completed application for Financial Assistance is required on an annual basis. We are currently taking applications for quarterly funds available July 2024 – June 2025. Incomplete applications will not be accepted. This includes the submission of copies of required documentation verifying identification, residency, and income.

Approved Financial Assistance applications are subject to a \$350 cap per child, per calendar quarter. The cap applies to the discounted portion of the fees for participation in optional programs of limited duration such as swim lessons, community and after-school enrichment classes. Financial Assistance is available on a financial year basis with quarters beginning in July and ending in June (Jul-Sep, Oct-Dec, Jan-Mar, and Apr-Jun). Funds are applied towards the cap based on the date you enroll. Discounts do not carry over from quarter to quarter.

For example, if you enroll your child in a \$100 enrichment class in September that begins in October and you qualify for Financial Assistance at 75%, your fee will be discounted by \$75. This discount is subtracted from your \$350 quarter cap leaving a remainder of \$275 in your July – September quarter which could be used for other classes or mini camps. (This example is illustrated in chart form below.)

Class Fee	Discount 75%	You Pay	Quarter Financial Assistance Balance
\$ 100.00	\$ 75.00	\$ 25.00	\$275

Example-Based on a quarterly cap of \$350.

Please note that there are no caps or limits for participation in essential programs such as after-school childcare and full-day camps.

Financial Assistance applications must be submitted at least three weeks before programming begins. Financial Assistance must be approved before registration. Staff cannot adjust payments or apply discounts retroactively.

If you wish to be considered for Financial Assistance, please complete the application, and return it together with any supporting documentation by mail, fax, email, or in person to one of the offices listed below. Only one application is necessary.

Virginia Avenue Park Office 2200 Virginia Avenue Santa Monica, CA 90404 tel: 310.458.8688 vap@santamonica.gov Swim Center Office 2225 16th Street Santa Monica, CA 90405 tel: 310.458.8700 fax: 310.450.5076 aquatics.mailbox@santamonica.gov Community Recreation <u>communityrecreation@santamonica.gov</u>

The City of Santa Monica is dedicated to providing your family with the best possible youth programs. If you would like more information on other programs offered by the City, or if you have any questions about the Financial Assistance application, please feel free to call the numbers listed above.

Sincerely,

Housing and Human Services Department Recreation and Art Department



# 2024-2025 Application for Financial Assistance for Youth Programs

Financial Assistance for youth programs is offered by the City of Santa Monica's Housing and Human Services and Recreation and Arts Departments. A new application for financial assistance is required on an annual basis. New applications are accepted throughout the year. Incomplete applications will not be accepted and will be returned to the applicant.

#### Applications may take up to three weeks to process.

**SANTA MONICA RESIDENTS:** Assistance is available for youth under the age of 18 who live in the City of Santa Monica.

**NON-RESIDENTS:** Children who are not residents of Santa Monica, but attend a Santa Monica SMMUSD public school on permit may be eligible for financial assistance for after-school, <u>school-based City programs</u> that take place during the school year.

Non-residents on permit do not qualify for financial assistance for <u>non-school based classes</u> such as Community Classes held at City parks, Community Aquatics, or summer programs.

#### SECTION A - GENERAL APPLICANT INFORMATION

Parent/Guardian Full Name:		
Relationship to Children:		
Address:Number and Street		
City	State	Zip Code
Phone (Home)	Phone (Work/Other)	
EMAIL		

#### SECTION B - CHILDREN IN THE HOUSEHOLD

This information will be used to determine eligibility for all children in your family under 18 years of age. Please list name, birthdate, school and grade in the Fall of 2024 for each child in your household, whether they need services or not. **Children must be listed as dependents on income taxes for verification of guardianship.** 

Child Name	Birthdate	School	Grade in Fall
Child Name	Birthdate	School	Grade in Fall
Child Name	Birthdate	School	Grade in Fall
Child Name	Birthdate	School	Grade in Fall

### ATTENTION APPLICANT:

ADDITONAL DOCUMENTATION IS REQUIRED. See page 2.

Office Use:	
Date received:	_ By
Is additional documentation attached Incomplete applications should not	

#### SECTION C - ADULTS IN HOUSEHOLD

<u>Income tax information must be attach</u>	hed for all of adults in the household. List additional adults on separate page.
Adults :	Relationship:
	Relationship:
	Relationship:
SECTION D - REQUIRED PAPERWORK	<
The Housing and Human Services an application and income information.	nd Recreation and Arts Departments administers the application and verifies

## -γerification of Identity

Copy of government issued picture IDs (ie. driver license, consulate, passport, etc.) for all adults in the household.

# →/erification of Income

Copy of submitted 2023 Income taxes for for all adults in the household or IRS Form 4506-T.

Current Utility Bill (gas or electric) Section 8 Housing verification

SECTION E - SIGNATURE

By signing below, I de	clare that all information provided in	n this application is accurate and true.
Parent/Guardian/Appl	icant Name (please print)	
Applicant Signature		Date
FOR OFFICE USE ONLY		
ActiveNet Date [	Database Date Letter M	lailed
Adjusted Gross Income per 202	3 Income Taxes:	Household #
Verification of Residency:		
Financial Assistance Granted	<u>(check one):</u>	
<ul> <li>Level 0 - 100% and 75%</li> <li>Full (Homeless/Foster Youth)</li> <li>Level 1 - 90% and 75%</li> <li>Level 3 - 50% and 25%</li> </ul>	IF HOMELESS, agency affiliation: OPCC Upward Bound House St. Joseph's Center Sojourn Domestic Violence Other:	<ul> <li>Denied (circle reason below)</li> <li>1. Income too high</li> <li>2. Child(ren) does not meet age requirements</li> <li>3. Insufficient evidence of income/residency</li> <li>4. Other:</li> <li>Mon-SM Resident</li> <li>Eligible for Summer? Yes No</li> </ul>
Reviewed By:		Date:
Approved By:		Date:
Denied By:		Date: