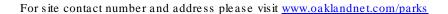
## OAKLAND PARKS, RECREATION, & YOUTH DEVELOPMENT

Please submit application to specific program location

YEAR:



Click or tap here to enter text. **SITE NAME:** 

Date: \_

Oakland Residency checked by: Proof of need reviewed by:



STAFF USE

## OPRYD FINANCIAL ASSISTANCE APPLICATION

FINANCIAL ASSISTANCE IS RESERVED FOR RESIDENTS OF OAKLAND

Click or tap here to enter text.

**Activity** Subsidy **Activity Name Activity Fee Amount Requested Balance Due** Date Given Click or tap here to Click or tap here to enter text. Click or tap to Click or tap here Click or tap here to enter text. Click or tap here enter a date. to enter text. enter text. to enter text. Click or tap here Click or tap here to enter text. Click or tap to Click or tap here to enter text. Click or tap here to Click or tap here enter a date. to enter text. enter text. to enter text. Click or tap here Click or tap here to enter text. Click or tap here to enter text. Click or tap to Click or tap here to Click or tap here enter a date. to enter text. Click or tap here to enter text. Click or tap here to enter text. Click or tap to Click or tap here Click or tap here to Click or tap here enter a date. to enter text. enter text. to enter text. **Participants Name** First: Click or tap here to enter text. Last: Click or tap here to enter text. **Birth Date:** Click or tap to enter a date. **Age:** Click or tap here to enter text. Address: Click or tap here to enter text. City: Click or tap here to enter text. Zip: Click or tap here to enter text. **Phone:** Click or tap here to enter text. **Email:** Click or tap here to enter text. **Parent/Guardian Name** First: Click or tap here to enter text. **Last:** Click or tap here to enter text. Address: Click or tap here to enter text. City: Click or tap here to enter text. Zip: Click or tap here to enter text. **a. TOTAL Yearly Household Income:** \$Click or tap here to enter text. **b. Number of Household Members Supported by this Income**: Click or tap here to enter text. c. Applicant must provide proof of Oakland residency to site staff  $\square$ d. Explain your need for financial assistance below: Click or tap here to enter text. X Click or tap to enter a date. Signature of Parent/Guardian Date

☐ Approved ☐ Scholarship amount: \$

☐ Reason/s Denied \_

( California ID Card, Driver's License, Utility Bill or Other (proof of Oakland Residency.)

□Denied

Revised: 2/12/2022