Aspen Recreation Department
110 E. Hallam St., Suite 135
Aspen, Colorado 81611
970-920-5140
970-920-7478 Fax
www.aspenrecreation.com

2012 Financial Aid Application
Deadline: May 1, 2012

Date of Application: _____

Name of Participant _____

Activities requested _____

Parents Information:

Mother's Name _____
Home Phone _____
Work Phone _____
Cell Phone _____
Email _____

Father's Name _____
Home Phone _____
Work Phone _____
Cell Phone _____
Email _____

Please list all children:

Name _____ Age _____ Program _____

Name _____ Age _____ Program _____

Name _____ Age _____ Program_____

Please explain special circumstances or recent changes in employment, family status, income or residence:

_____

_____

_____

In order to be considered for financial aid, we must consider any and all household income, whether or not your family is married, living together, or in any way contributing to household income. Please understand that we may ask for documentation regarding child custody, child support or other factors that affect your household income.

(Over)

Employment: (Please list all employers)

Father:
Employer's Name & Address _____
Employer's Phone _____
hours worked/week _____

Employer's Name & Address _____
Employer's Phone _____
hours worked/week _____

Mother:
Employer's Name & Address _____
Employer's Phone _____
hours worked/week _____

Employer's Name & Address _____
Employer's Phone _____
hours worked/week _____

_____
Estimated Total Household Gross Annual Income
2011 $_____ **2012 $**_____

Include any non-work income: Child Support, Social Security, Trust Income, Workers comp, Cash gifts, dividends from stocks or bonds, pensions/retirement, interest on savings, other.

Please show how you calculated your estimated income:

Checklist:
____ 2011 Federal Tax Returns (2010 if 2011 not yet completed)
_____ Current W-2's from all employers
_____ Current pay stub from all employers
_____ Self-employed – financial statement
_____ State of Colorado Identification Verification and Affidavit

Falsification of any of the above information or use of Financial Aid funds for purposes other than described herein, may lead to immediate termination of Financial Aid funding.

Parent Signature _____ Date: _____

Affidavit – Provided to Aspen Recreation

I,_____, swear or affirm under penalty of perjury
under the laws of the State of Colorado that (check one):

_____ I am a United States citizen, or

_____I am a Permanent Resident of the United States, or

_____I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully
present in the United States prior to receipt of this public benefit. I further acknowledge
that making a false, fictitious, or fraudulent statement or representation in this sworn
affidavit is punishable under the criminal laws of Colorado as perjury in the second
degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate a
separate criminal offense each time a public benefit is fraudulently received.

_____ _____

Signature Date

A copy of one of the following forms of identification verification is attached.

_____ Colorado driver's license or identification card;

_____ US military card or military dependent's identification card;

_____ US Coast Guard merchant mariner card; and

_____ Native American tribal documents