SOCA Financial Assistance Program

Purpose

The purpose of the SOCA Financial Assistance Program is to offer financial support to those families with the greatest need and to provide support to qualifying applicants. One of SOCA's core values is to welcome all participants and remove barriers to participation. The Financial Assistance Program seeks to serve this important value. It is SOCA's wish to provide assistance so that children may participate in SOCA programs, based on demonstrated need and SOCA's ability to fund the subsidy.

General Information

Financial assistance is available only in the youth programs. Assistance is provided to the Travel (Elite, Premier and Classic), Challenge, Recreational and Hot Shots programs, only. There is no financial assistance available in the supplemental camp and clinic programs.

Financial assistance is applied to registration fees, only. Financial assistance does not apply to uniform or other soccer equipment expenses, tournament related expenses, travel expenses, or other expenses related to participation.

There is no full financial assistance in either the Travel or Challenge programs. All participants in these programs are required to contribute to fee payment. Partial assistance is available.

Full financial assistance is available in the Recreation and Hot Shots programs.

There are three levels of assistance available to qualifying families. Need is determined based upon participation in government public assistance programs (School Nutrition Program, Free/Reduced Lunch Program), or by documenting income within established limits. The qualifying limits that SOCA uses are those currently in place for the federally supported free and reduced meals programs in the public schools.

Application Deadlines for 2016/2017 Soccer Year

Travel Program (Elite, Premier, Classic)

June 7, 2016 (requests considered for full year)

Challenge Program: Fall season only
Challenge Program: Spring season only
Recreation Program: Fall season only
Recreation Program: Spring season only
Hot Shots Program: Spring season only
Hot Shots Program: Spring season only
February 14, 2017

Procedures

All applications for assistance must be made by completing a current SOCA Request for Financial Assistance form.

If a family is requesting aid for more than one child, a separate SOCA Request for Financial Assistance form must be completed for each individual child.

All requests will be reviewed by SOCA and a determination made immediately if possible, or within five business days.

Upon determination by SOCA, applicants will have the option to: 1) accept the offered financial assistance and pay for any balance due, 2) accept the offered financial assistance and pay the first installment of an agreed installment payment plan, 3) decline the assistance and decline to participate, 4) appeal for additional funding within five business days of original determination.

An appeal for additional funding does not guarantee nor imply additional funds will be provided. Additional funds are extremely limited. Each appeal must include all original documentation, a written narrative describing the need for additional funds, and any other documents that may support the request for additional funds.

The appeal will be reviewed by a committee of the Board of Directors. A determination and notice will be provided to the applicant as soon as possible. The applicant has an additional five business to act upon the Committee's determination by either completing registration or declining to participate.

No player registration is considered complete until the applicant's share of the fee is paid, or full assistance is granted.

Documents Required

All applications must be accompanied by a copy of School Nutrition Program determination letter, if applicable, or copies of:

- 1. Most recent Form 1040, Federal Income Tax Return.
- 2. Four (4) most recent pay stubs from all household income earners.
- 3. Copies of any additional legal documents supporting the request for assistance.

All financial assistance request materials submitted to SOCA are strictly confidential.

SOCA-Charlottesville Request for Financial Assistance: 2016-2017

1. Player Information

Player's	Full Name:					Date of	Birth://	
		First	Middle		Last		mm dd yyyy	
Street A	ddress:							
City:				_ State:		Zip Code:		
Home P	hone:			Email	Address:			
2. Prog	ram for Wh	nich Financial	Assistance is Bo	eing Rec	uested (ch	neck one):		
E	_ Elite U18-U16: \$1,150				Challenge: F=\$260; S=\$215			
F	Prem. & Classic U18-U15: \$610				Recreation: \$105			
E	Elite U15-U11: \$1,285				Hot Shots: \$68			
F	Prem. & Clas	sic U14-U11: \$	1,100					
Assistan	ce Requeste	d (check one):	Specific amou	nt \$		Maximum	Available	
3. Pare	nt/Guardia	n Information						
Mother's Name:					Phone:			
Mother's	Email Addr	ess:			_			
Father's Name:					Phone:			
Father's	Email Addre	ess:			_			
4. Hous	sehold Size	(number of a	ıll persons living	at the p	layer's hon	ne):		
5. Household Income Information Father's Total Annual Income:				\$				
N	Mother's Total Annual Income:			\$				
C	Other Income Earners' Total Annual Income:			\$				
Α	Annual Child Support:			\$				
Α	Annual Alimony:				\$			
C	Other Income:				\$			
7	Total Household Annual Income				\$			
	es If "Ye	No s", a copy of y	I Receive Federa	on Progra	am determir	nation Letter <u>mus</u>	<u>t</u> be provided.	
	If "No'	Most recen	y of the following do it Form1040: Federa ost recent pay stubs	al Income	Tax Return.		l Assistance:	

Signature of Parent/Guardian Applicant

3. Copies of any additional legal documents supporting your request.

7. I certify that all information and materials provided in this request for financial assistance are true to the best of my knowledge.