



Cedar Stars Academy Monmouth Financial Aid Application – _____ Division 2020/2021 Season

We understand that soccer can be an expensive sport. We are committed to offering the highest quality programming at the most affordable price. Our goal is to offer the highest value possible for every dollar spent on soccer. Cedar Stars Soccer Academy is pleased to offer a Financial Aid program to help families offset club fees. The club has a limited number of financial aid available, therefore, the number of players receiving aid and the amount of the aid will vary depending on the funds available.

In order to be considered for a scholarship, applicants must have been offered and accepted a roster spot on one of our Cedar Stars Soccer Academy teams. The player must be registered and have paid the required deposit. The deposit is required before the application can be reviewed. This can be done by checking the acceptance email that was sent to your email from Sports Connect (formerly Blue Sombrero). **The deposit is not refundable!**

If financial aid is awarded, it reduces monthly club fees. Financial aid does not cover 100% of club fees. All scheduled payments must be made until notified that financial aid has been awarded.

****Team fees and travel expenses will be at the expense of the player.**

FINANCIAL AID GUIDELINES, CRITERIA AND ELIGIBILITY:

Guidelines:

1. Financial need must be demonstrated for consideration. Economic hardship will be the only factor in awarding Financial Aid. No one will be disqualified from consideration because of sex, race, color, creed or religious beliefs.
2. While we try to address as much of the need as possible, Financial Aid amounts will be based on the number of players demonstrating need, the extent of that need and the budget available for Financial Aid that year.
3. Financial Aid awards will be reviewed on a yearly basis or in the event they join after the start of a season.
4. **NO** player will receive financial aid for 100% of their tuition fees
5. Any unpaid league fees from prior seasons will result in an applicant being ineligible for Financial Aid.
6. It is suggested that Financial Aid recipients volunteer their time back to the club when requested.
7. **Applications MUST be received by the August 1, 2020 deadline or they will not be considered.**
8. Applications that are not filled out completely will not be considered.
9. Applications must be filled out by both parents and legal guardians requesting aid. Applications cannot be filled out by coaches, team managers, children or friends.
10. Minimum qualifications based on USDA household income guidelines for the current year (chart below)
11. If a player decides to leave in the middle of the season for another club, the full balance is due unless proof that they are relocating to a different state is provided.



2020 Poverty Guidelines for the 48 Contiguous States & District of Columbia

| <i>Number of Persons in Family/Household</i> | <i>Poverty Guideline</i> |
|---|---------------------------------|
| 1 | \$12,760.00 |
| 2 | \$17,240.00 |
| 3 | \$21,720.00 |
| 4 | \$26,200.00 |
| 5 | \$30,680.00 |
| 6 | \$35,160.00 |
| 7 | \$39,640.00 |
| 8 | \$44,120.00 |

Reference Source: <https://aspe.hhs.gov/poverty-guidelines>

**** The 2020 poverty guidelines are in effect as of January 15, 2020

*** For families/households with more than 8 persons, add \$4,480 for each additional person.

Financial Aid Criteria/Eligibility:

- Family needs
- Number of children in a family
- Number of players in CSA Soccer
- Family Income
- Overall Financial Situation
- The player applicant must be a full-time student with a GPA of 2.0 or above

After Financial Aid is awarded, the remaining balance of player registration fees must be paid in full by January 15, 2021 unless an alternate approved payment schedule is in place. Failure to maintain good financial standings with CSA will result in a player being ineligible to participate in practice and games.

INSTRUCTIONS FOR COMPLETING THE FINANCIAL AID APPLICATION FOR CSA:



Documents Needed:

1. Complete all requested information on the application for financial aid.
2. Copy of both parents completed IRS 1040 (A) Income Tax Return (All pages) for tax year 2019.
3. Copy of a valid photo ID's
4. Copy of a utility bill matching the address on the government ID
5. Proof of most recent semester report card

Application for Financial Aid

Name of Player(s) in CSA:

1. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____
2. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____
3. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____
4. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____

Name of Parents or Legal Guardians:

Father/Legal Guardian: First Last

Mother/Legal Guardian: First Last

Street Address: City State Zip Code Home Phone Cell Phone

Email Best Phone Number to Be Reached At



The following questions will be used solely to help determine need for financial aid:

How many children or total dependents do you support in your household? _____

Financial Aid is for the year of: 2020-2021

Please check one of the following ranges for yearly household income:

☐ Less than \$20,000

☐ \$21,000 to \$50,000

☐ \$51,000 to \$100,000

☐ \$100,000 +

Please describe your need for financial aid below:

*** How much financial assistance are you seeking? _____

1. Sign and date the form. **No application will be reviewed unless we receive all of the required documents and the deposit payment is made. NO EXCEPTIONS!**
2. Send or drop off the application for Financial Aid to Cedar Stars Academy at:

**Cedar Stars Academy Monmouth
200 Tornillo Way, Tinton Falls, N.J. 07712
Attn: Financial Aid Board**

Financial Aid Applications Are Due No Later than August 1st

Cedar Stars Academy cannot guarantee financial aid for all applicants. You will be notified of the status of your application upon review.

By signing, I attest that the documents and information provided for Financial Aid review are accurate:

Signature of Parent or Guardian Completing Application

Date



For Office Use Only (below this line)

This scholarship was reviewed on: (Date) _____ Division: _____

Name of Player (s): _____

Age Group: _____

Parent's Name: _____

Parent's Contact number: _____

Photo ID: ☐ Yes ☐ No Income Tax: ☐ Yes ☐ No Utility Bill: ☐ Yes ☐ No Statement: ☐ Yes ☐ No

Most Recent Report Card: ☐ Yes ☐ No

Total Cost of Program: _____

Member Since: _____ Accounting Dept. Balance as of: _____

Sibling(s) in the Club: ☐ Yes ☐ No Sibling(s) Name: _____

Child of Staff: ☐ Yes ☐ No Staff's Name: _____

Previous Financial Aid: ☐ Yes ☐ No

Which season they received Financial Aid if yes: _____

Asked for Coach rating: ☐ Yes ☐ No

Coaches Name for team: _____

Coaches Rating: _____ Number of players on Roster: _____

☐ Accepted ☐ Partial Payment: _____

☐ Full Payment: _____

☐ Discount: _____

☐ Payment Installments: _____

☐ Rejected _____

Reason for rejection: _____

GM/Divisional Manager Signature _____ Date _____

Club Executive Director Signature _____ Date _____

Parent Volunteer (For any team): ☐ Yes ☐ No

Parent will be notified about balance either by: ☐ Phone Call ☐ Email

Date Meeting was held: _____