



## Ice Hockey in Oregon Financial Assistance Opportunity

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### GENERAL INFORMATION- 2020/21 Season

The Portland Jr. Winterhawks Youth Hockey Association (P JW 501(c)3) has established a financial assistance program to provide assistance to player families with a financial hardship. **Our hope is to afford kids an opportunity to play hockey despite a financial hardship.** Levels of assistance may vary based on funds available. Any/all financial awards will be paid directly to the managing youth hockey association in Oregon. Partial or full awards may be granted; however, in no case will a financial award amount exceed the current year's registration fee.

Scholarships will be first considered for any athlete previously registered with the Winterhawks Jr. Hockey program although scholarships may be awarded to other player families with a child playing within the State of Oregon during 2020/21 season. **We believe anyone interested in playing hockey in Oregon should have the opportunity to continue to play.** Priority will be given to players playing recreational hockey, but players in travel hockey may be considered on a case-by-case basis. The P JW Board has established a Financial Assistance Committee (FAC) authorized to award assistance based on availability of funds. Factors for approval will include, but are not limited to, the following:

1. Demonstrated financial need
2. Availability of funds
3. Completed financial aid form (incomplete forms will not be considered)

### PROCEDURES

Forward completed applications to: [vicepresident@jrwinterhawks.com](mailto:vicepresident@jrwinterhawks.com)

**Deadline for submittal: August 31, 2020.**

Exceptions may be reviewed on a case-by-case basis however because of limited funding we *strongly* recommend submitting your application prior to the deadline. The FAC will review the form for completeness and forward the application to the Treasurer, who may verify financial information submitted. The FAC will meet in a **closed and confidential** session to review applications based on guidelines established by the P JW Board. Applicants will be notified in writing.

### APPLICATION CHECKLIST:

- Completed Application Form, Sections I, II**
- Copy of parent/guardian most recent pay stub(s)**
- Copy of the child's most recent report card**
- One letter of recommendation from either a coach or teacher stating why the applicant should be selected for an award.**

**PART I - PERSONAL INFORMATION**

Player Name: \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_\_

2019/20 hockey association and age level: \_\_\_\_\_

Association name and age level of play for 2020/21 season:

\_\_\_\_\_

Mother/Guardian Information:

Father/Guardian Information:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

Net Monthly Income \_\_\_\_\_ Net Monthly Income \_\_\_\_\_

(including any child or spousal support) (including any child or spousal support)

The above parents/guardians are (check all that apply):

\_\_\_\_\_ Married to each other \_\_\_\_\_ Living together \_\_\_\_\_ Divorced or legally separated

If divorced or legally separated, which parent has primary custody? \_\_\_\_\_

Will non-custodial parent be sharing in any portion of the player's expenses? \_\_\_\_\_

Number of family members in the household: \_\_\_\_\_ List ages of dependents: \_\_\_\_\_

Has your family experienced an unexpected financial hardship? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please briefly explain: (submit extra sheet if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you received financial assistance from PJW before? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Total amount you can pay towards registration and association fees:** \_\_\_\_\_

**PART II - SCHOOL INFORMATION**

Name of school: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current GPA \_\_\_\_\_

Sports Played: \_\_\_\_\_

School Club Participation: \_\_\_\_\_

Special Awards or Recognition: \_\_\_\_\_

Volunteer Activities: (include Hours per month) \_\_\_\_\_

Other Hobbies & Interests: \_\_\_\_\_

Future educational goals/aspirations/plans: \_\_\_\_\_

\_\_\_\_\_

Other requested considerations or notes for review committee (feel welcome to include):