JUNIOR GOLF ASSOCIATION OF ARIZONA 2021 FINANCIAL AID APPLICATION

INFORMATION FOR FINANCIAL AID APPLICANTS

- 1. Candidate must be a member of the Junior Golf Association of Arizona.
- 2. Candidates must show outstanding character, honesty, integrity, and abide by all of the policies and procedures of the Junior Golf Association of Arizona.
- 3. Financial need will be determined on the application submitted.

MANDATORY FILING REQUIREMENTS

Completed application is due to the Junior Golf Association of Arizona Financial Aid Committee before any financial aid will be considered. Any incomplete application will be automatically disqualified from further processing.

All information contained in the Financial Aid Application will be kept confidential

INSTRUCTIONS

Complete all questions indicating "N/A" if not applicable. Use additional sheets if necessary.

JGAA MEMBER INFORMATION SECTION (Please type or print in black ink

A. Name:		B. Date of Birth:
C. Telephone:	D. Email _	
E. Address:		F. County:
G. City:	H. State:	I. Zip:
J. School:		
K. Graduation Date:		
L. JUNIOR GOLF PARTICIP	ATION	
1. JGAA	How many years	to
2. JGAA Boys Golf Club	How many years	<u>_</u>
3. LPGA*USGA Girls Golf	How many years	_
4. USGA Handicap	or average score	_
3		g position) List most recent events first
b		
M. School, Church, and Civic	Related Activities, Awards and	Accomplishments (use additional sheet if necessary
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PLEASE PROVIDE INCOME TAX INFORMATION FOR THE YEAR LISTED!

Parental Information			
Parents/Guardian Names: Father Mother	☐ Married/Unmarried ☐ Single ☐ Divorced/separated ☐ Widowed		
Month and year your parents were married, separated, divorced, or widowed (Example: Month and year: 05/1996)			
In 2020, did you receive benefits from any of the federal benefit programs listed? Mark all the programs that apply. The federal benefit programs are listed in the answer column. Report benefits received for all of your household members. Include in your household: (1) your selves and (2) other people only if they live with you.	□ Supplemental Security Income □ Food Stamps □ Free or Reduced Price School Lunch □ Temporary Assistance for Needy Families (TANF) □ Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)		
Have you completed a 2020 IRS income tax return or other income tax return?	☐ Already completed ☐ Will file ☐ Will not file		
What income tax return did you file or will you file for 2020?	☐ IRS 1040 ☐ IRS 1040A, 1040EZ ☐ A foreign tax return ☐ A tax return with Puerto Rico, another U.S. territory or a freely associated state		
If you have filed or will file a 1040, were you eligible to file a 1040A or 1040EZ? In general, a person is eligible to file a 1040A or 1040EZ if he or she makes less than \$100,000, does not itemize deductions, does not receive income from his or her business or farm, and does not receive alimony. A person is not eligible to file a 1040A or 1040EZ if he or she makes \$100,000 or more, itemizes deductions, receives income from his or her own business or farm, is self-employed, receives alimony, or is required to file Schedule D for capital gains. If you filed a 1040 only to claim Hope or Lifetime Learning tax credits, and would have otherwise been eligible for a 1040A or 1040EZ, you should answer "Yes."	☐ Yes ☐ No ☐ Don't know		
What was your adjusted gross income for 2020? Adjusted gross income is on IRS form 1040—line 37; 1040A—line 21; or 1040EZ—line 4.	\$		
How much did you earn from working (wages, salaries, tips, combat pay, etc.) in 2020? Answer this question whether or not you filed a tax return. This information may be on your W-2 forms, or on IRS Form 1040—lines 7+12+18+Box 14 of IRS Schedule K-1 (Form 1065); 1040A—line 7; or 1040EZ—line 1.	\$Father/Stepfather \$Mother/Stepmother \$		

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Parental Information Continued	
What was the amount you paid in income tax for 2020? Income tax amount is on IRS Form 1040—line 57; 1040A—line 35; or 1040EZ—line 11.	
Enter your exemptions for 2020. Exemptions are on IRS Form 1040—line 6d or 1040A—line 6d. On the 1040EZ, if a person checked either the "you" or "spouse" box on line 5, use EZ worksheet line F to determine the number of exemptions (\$3,300 equals one exemption). If a person didn't check either box on line 5, enter 01 if he or she is single or 02 if he or she is married.	
How many people are in your household?	

PURPOSE

The purpose of the JGAA Financial Aid Program is to encourage and promote the continued involvement of junior golf for those that may not otherwise have the financial means to do so. It is a benefit for beginners and those who have participated in the JGAA junior golf programs and who have demonstrated that they follow the JGAA code of conduct, policies, and procedures and maintain a high level of etiquette, honesty and adhere to the rules of golf.

ELIGIBILITY

The applicant must be a member of one of the Junior Golf Association of Arizona programs and is either just beginning or has participated in a JGAA junior golf program AND the primary residency of the legal guardian is within Arizona.

FINANCIAL AID BENEFIT

Financial Aid is provided in the form of scholarships for tournament entries based on need and awarded at the discretion of the Financial Aid Committee depending on the level of play and experience of the applicant. All financial aid will be provided only for those events administered by the Junior Golf Association of Arizona and no funds will be distributed directly to the applicant.

The awarding of the Financial Aid is further contingent upon the recipient giving back to the Junior Golf Association of Arizona by volunteering to assist the JGAA staff either at a tournament proper or at their office. The assistance will be at the direction of the JGAA staff at the tournament site or the Tournament Director/Administrative Assistant at their office. The amount of time in assisting will be based on the following: 1 to 3 tournament entries – 1 day of volunteer service, 4 to 6 tournament entries – 2 days of volunteer service and 7 or more tournament entries – 3 days of volunteer service. The parents/guardians assistance if available will be required also. The Financial Aid Committee expressly reserves the right and may revoke any commitment to extend financial aid to any applicant if their behavior so warrants.

SCHOLARSHIP APPLICATION CERTIFICATION

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I certify that the enclosed information is true and correct to the best of my knowledge. Any false information will automatically void this application.

Parent/Guardian Signature:	Date:
Parent/Guardian Name: (Please print):	
Address and Phone if different from applicant:	