

### INTERSTATE SOCCER CLUB

### **OVERVIEW**

Interstate Soccer Club (ISC) is proud to serve our community. We are continuing to spread the love for soccer throughout the greater Siouxland area, and we plan to better that journey while enhancing our offering to best fit the needs of our environment. We understand how the youth sports model in our country can be financially challenging for some families. That is why we have diligently worked to make soccer as affordable as possible in our area.

Currently, ISC has a scholarship program that helps cover a portion of the club fees. Each recipient of a scholarship will receive a 50% reduction of club fees. This means, at the time of registration, a family would only need to cover half the club fees for the competitive year. This opportunity, combined with our payment plan (three payments per year) helps make club soccer more affordable.

It is important to note that our scholarships do not cover all costs families will incur during the competitive year. These costs are commonly known as team fees. We try our best to give families (and teams) estimates of team expenses that are not related or managed directly by us. Families will know up front the financial costs from participating in our programs during the year.

#### **HOW TO APPLY**

We encourage our families to contact us in regards to ideas, help and donations to improve scholarships. As a 501(c)(3) nonprofit organization, we appreciate any support and feedback you can provide. Financial donations to increase the potential of our scholarships are hugely appreciated. That same way, volunteers to help us improve this system are also needed and appreciated. Please contact any board member, or your team coach to reach us in regards to this topic.

# SCHOLARSHIP APPLICATIONS ARE DUE WITHIN 10 DAYS OF PLAYER REGISTRATION

Players applying for scholarships must turn in the following:

- 1. Completed Scholarship Application form
- 2. Scholarship Recipient Feedback form
- 3. Documentation (i.e., evidence from school participation in free or reduced meal program).

<sup>\*\*</sup>Home-schooled players only may submit the Joint IRS 1040 tax returns.



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DATE SUBMITTED:				
	SCHOLARSHIP APP	<u>LICATION</u>		
(Please fill out this f	form to the best of your abilities and retur	n it to ISC - see below.)		
Name of Player:	Date of	Date of Birth:		
Team/Coach:	Age Group:	Parent/Guardian Name:		
Address/Street:	City:	State:	<del></del>	
Zip: Phon	e:	Email:		
African-America	RACIAL OR CULTURAL GR an American Indian Caucasian f participation in the Free/Reduced F	Hispanic/Latino Pacific Islander	Other e following calculation.	
		-	-	
1. Enter your adjusted gross income (AGI) from Form 1040, 1040-SR, or 1040-NR, Line 11			1	
<ol> <li>Enter any tax-exempt interest from Form 1040, 1040-SR, or 1040-NR, Line 2a.</li> <li>Enter any amounts from Form 2555, Lines 45 and 50.</li> </ol>			2 3	
,	Line 6a is more than Line 6b, subtract Lin	ne 6b from Line 6a and enter	4	
5. Add Lines 1 through 4.			5	
6. Enter your tax family size. This	s includes: you, your spouse and your de	pendents on your tax return	6	
ISC utilizes the Free/Reduced Pri awarding scholarships. ISC may	ice School Meals Program and Internal R request additional information.	evenue Service poverty guidelines as	the primary indicators in	
	will be used by the scholarship committee ty line for the area. Please describe any	-		
	a awards scholarships to families who ded according to the player's ability. Award			
	r a scholarship program. There will be a nts, field maintenance or other club task		rship program. ISC will	
will result in the play	lance of club fees not covered by ger pass being revoked making the nt. Player balances will be monito	e player ineligible to practice or p		
I certify that to the best of my kn consideration for a scholarship fr	nowledge the information in this application on Interstate Soccer Club.	tion is correct, having been provided	for the sole purpose of	
Secondly, with my signature belo	ow, I understand I will have to fulfill the s	weat equity component of the scholar	ship program.	
Signature of player's parent or gu	ardian	Date		
Please send this	s form together with the Scholarship Recip	pient Feedback Form and documentation	n by mail to:	

ISC, P.O. Box 2305, Sioux City, IA 51101 or by email to: <a href="mailto:contact@interstatesoccerclub.com">contact@interstatesoccerclub.com</a>



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### SCHOLARSHIP RECIPIENT FEEDBACK FORM

(Please fill out this form to the best of your abilities and return it to your coach or to ISC - see below.)

Name of	Player	Age Group	Boy or Girl – please circle one		
Parent/Guardian		_ Phone			
Street Address		_ City			
State _	Zip	_ Email			
Check all that may apply and insert year(s):					
_	I received a soccer scholarship from ISC for the fall AND spring of th  I am applying for a soccer scholarship for the fall AND spring of the				
Comments					
1.	Did the ISC soccer scholarship make it possible for you to play trav	vel soccer?			
2.	How likely would it be for you to play soccer without a scholarship	?			
3.	Did you receive all the scholarship money you were hoping for? P	lease Explain.			
4.	What suggestions do you have for the ISC scholarship committee?	>			

Please send this form together with the Scholarship Application by mail to:

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