Glade Run Foundation Scholarship Program Policies and Procedures

1) The amount of scholarship paid for any individual shall not exceed the actual fees charged, nor the fees charged to non-scholarship participants. Rates for scholarship participants may not be more or less than that of non-scholarship participants receiving comparable services. Glade Run program directors are responsible for providing Glade Run Foundation with the eligible program fee amount for each participant.

2) The scholarship will be paid directly to the program on behalf of the participant. The individual or family shall not receive any direct cash benefit from the scholarship.

3) For summer camp, scholarships will be issued to the camp on a rolling basis after June 1, following Glade Run Foundation’s receipt of the signed Scholarship Accountability and Reimbursement Agreement Form, until available funds are exhausted. For other programs, scholarships will be considered on a rolling basis as long as scholarship funding is available.

4) The program must credit the scholarship to the participant’s account.

5) The program and parent/guardian/participant must notify Glade Run Foundation immediately if a participant withdraws or is removed from services, or otherwise becomes ineligible for a scholarship.

6) Scholarship funds for individuals who withdraw or are removed from the programming, or who become ineligible for the scholarship prior to the end of the session must be refunded to Glade Run Foundation by the program within 30 days following the date of withdrawal, removal or determination of ineligibility of the participant. The scholarship reimbursement shall be pro-rated based on the amount of time remaining for the session.

7) Acceptance of this scholarship does not exempt the family or participant from abiding by the policies of the program and the program director has the right to remove a participant from the program at any time for failure to abide by their policies.

8) Selection for scholarship shall be determined without regard to race, gender, religion, or similar characteristics of the applicants. Scholarship amounts are based on a sliding income scale as determined by Glade Run Foundation and upon the availability of funds and the number of eligible applicants.

9) All application information must be fully completed and submitted on time by the applicant in order for the application to be considered, including the Application Form and a copy of the most recent Federal Income Tax Return according to the application deadline policy.
10) Scholarship dollars may be granted only to prior to the start of services, and cannot be utilized for unpaid balances. Accounts must be paid in full at the time of application.

11) All application information will be maintained by Glade Run Foundation in the strictest confidentiality, including income information. Scholarship applications will be stored in a locked cabinet in the Glade Run Foundation office in Zelienople, PA and will not be shared outside the Glade Run Foundation Scholarship Committee for purposes of review and determination.

By signing this form, I/we agree to abide by the Scholarship Policies and Procedures. Further, I/we acknowledge that failure to abide by these policies and procedures may result in the individual’s removal from the scholarship program and that the individuals/parent/guardian will be held responsible for any monies owed to the cam. This form must be returned with the application.

___________________________________________________________
Signature, Participant or Parent/Guardian if under 18               Date
___________________________________________________________
Printed Name

Participants Name(s) (printed) if under 18

Due date: Rolling; for summer camp please apply prior to June 1 to be considered for current year.

Online Applications can be found at: www.gladerun.org

Application forms should be addressed to:
Sheila Talarico
Executive Director
Glade Run Foundation
P.O. Box 70, Beaver Road
Zelienople, PA 16063

Inquiries can be made to: (724) 452-4453, ext. 1244 or stalarico@gladerun.org

The application form must be accompanied by a copy of the most recent signed IRS Federal Tax Return for each wage-earning adult residing in the household.
Scholarship awards will be determined as funding becomes available for the year.
CONFIDENTIAL GLADE RUN FOUNDATION SCHOLARSHIP APPLICATION

Participant Information:
Name: ________________________________ Age ________ Birth date ___________
If applicable: Name of school ________________ Grade enrolled (for scholarship year)______
Participant Program: ____Summer Camp ____EAL ____Therapeutic Riding ____ILE

Parent(s) or Guardian(s) residing with camper (and primary custodian) if under 18:
Name __________________________________________ Relationship_________________
Name __________________________________________ Relationship_________________

Primary Contact Information:
Street Address ______________________________ City ___________ St ____ Zip_________
County _________________ Home Phone __________________ Work Phone __________________
Other Phone ___________________ E-mail ___________________________

Please complete for any additional individuals living in the same household as the applicant.

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship to applicant</th>
<th>Age</th>
<th>Dependent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>___Yes   ___No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>___Yes   ___No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>___Yes   ___No</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>___Yes   ___No</td>
</tr>
</tbody>
</table>

Please attach a complete photocopy of your most recent IRS Tax Forms 1040, 1040A, or 1040EZ (as signed and filed with the IRS, including all schedules) for all wage earning adults residing in the household. If you do not file an IRS Form 1040 and receive only non-taxable income please submit documentation/verification of non-taxable income.

Signature of parent(s)/guardian(s): I/we certify that all information on this form, as well as all supporting documentation, is true, accurate, and complete to the best of my/our knowledge and that all household income has been reported. I/we understand that deliberate misrepresentation of this information may result in the scholarship being denied or revoked, and any payments made by Glade Run Foundation must be reimbursed.

______________________________________     __________      _______________________________
Signature          Date            Printed name

______________________________________     __________      _______________________________
Signature          Date            Printed name