



## La Costa Canyon Pop Warner 2025 Scholarship Application

La Costa Canyon Pop Warner is proud to offer support to help cover the cost of participation for those who would otherwise not be able to participate due to financial circumstances.

To apply for a scholarship, applicants must meet one of the following conditions:

1. The applicant’s Household income must not exceed the level detailed in the table provided.
2. The applicant would otherwise not be able to participate due to extenuating circumstances.

Household Size	Annual Income
1	N/A
2	36,400
3	40,950
4	45,450
5	49,100
6	52,750
7	56,400
8	60,000

To apply for the scholarship, please follow these steps:

1. Complete the LCCPW online and in-person registration process.
2. Complete the Scholarship Application form and attach the required documentation.
3. Provide income verification in the form of this year’s signed and filed federal tax return.
4. Submit the completed application and required documentation by the April 30<sup>th</sup> deadline to be considered eligible.
5. If a scholarship is awarded, the applicant is responsible for a \$250 non-refundable scholarship fee, before being eligible for inclusion in a team roster.
6. Any scholarship recipient who does not remain in good standing with the league due to behavioral issues and/or excessive absences, will not be eligible for future LCCPW scholarships.



## LCCPW Pop Warner 2025 Scholarship Application Form

The following information must be provided on the application form:

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

Parent/Guardian Name: \_\_\_\_\_

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

City: \_\_\_\_\_

Zip: \_\_\_\_\_

Cell: \_\_\_\_\_

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

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

Prior Season Team: \_\_\_\_\_

Household size: \_\_\_\_\_

Does the household income exceed the limit for the household size in chart above?  
Circle one:

YES

NO

If you answered yes to the question above, please use the back of this application to describe the extenuating circumstances that require you to receive a scholarship.

**I HEREBY DECLARE THAT THE INFORMATION PROVIDED IN THE APPLICATION ABOVE IS TRUE AND ACCURATE; I AUTHORIZE LCCPW TO VERIFY ANY AND ALL INFORMATION HEREIN.**

Signature: \_\_\_\_\_

If you have questions, please email [president@lccpw.org](mailto:president@lccpw.org)

**Email the completed scholarship application to: [treasurer@lccpw.org](mailto:treasurer@lccpw.org)**

Note: Scholarships are limited to the first qualified 25 applicants and are subject to availability.