

Santa Cruz Little League Scholarship Program

The Santa Cruz Little League (SCLL) firmly believes that any child who wishes to play Little League Baseball should be able to do so regardless of their financial situation. SCLL offers scholarships for players where the registration fee would pose a hardship for the family. The success of SCLL and its scholarship program is dependent upon members of the community stepping forward to assist with the many tasks associated with running the league. Anyone applying for a scholarship is asked about how they can volunteer to make SCLL a better league.

How to Apply for a Scholarship

Submit a completed Scholarship Application form along with a Volunteer Application form at the in-person registration dates, scan and email to santacruzlittleleague@yahoo.com or by mail to:

SCLL
PO BOX 1723
Santa Cruz, CA 95061

Once the Scholarship Application has been received, the Santa Cruz Little League Scholarship Committee will review the application and notify the applicant of a decision via email within 5 days.

Terms and Conditions

If the scholarship request is approved, the following terms and conditions will apply:

1. The scholarship will cover the registration fees only for one season in all or in part;
2. Parent or legal guardian agrees to "re-pay" the League through volunteering a number of hours depending on the amount of the scholarship.
3. All information contained within the application is strictly confidential and access will be limited only to members of the Santa Cruz Little League Scholarship Committee which is made up of members of SCLL's Board of Directors.

Please also note that the Santa Cruz Little League now accepts credit card payments via Pay Pal.

SCLL Scholarship Application Form

Player's Name: _____

Player's Division : ___ 50/70 ___ Major ___ AAA ___ AA ___ A ___ Farm ___ T-ball

Parent/Guardian Full Name (s)	
Relationship to Player	
Address	
Phone #:	
Email Address:	

Is your child eligible for school lunches/meals? : _____

Annual household gross income: \$ _____

Describe your financial need for this scholarship: _____

Have you received financial assistance from SCLL in the past? _____

- | | |
|---|--|
| <input type="checkbox"/> I can pay \$40 towards my child's registration fees. | <input type="checkbox"/> I can pay another amount \$ _____ |
| <input type="checkbox"/> I can pay \$75 towards my child's registration fees. | <input type="checkbox"/> I am unable to pay anything at this time. |

of hours per month you are willing to volunteer in Little League: _____

Please check the areas you are interested in volunteering:

- | | |
|---|--|
| <input type="checkbox"/> Grounds keeping
<input type="checkbox"/> Snack shack
<input type="checkbox"/> Fund raising (50/50 raffle,
<input type="checkbox"/> Scorekeeping (training will be provided) | <input type="checkbox"/> Other

_____ |
|---|--|

I have answered the above questions to the best of my ability.

Parent/guardian signature

Date