



Brandon/Groveland Office  
609 S. Ortonville Rd  
Ortonville, MI 48462

P 248/627-1873

**SPONSORED BY:**

Brandon Schools  
Township of Brandon  
Township of Groveland  
Village of Ortonville  
  
Oakland County  
Circuit Court –  
Family Division

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Thank you for reaching out to BGYA for a scholarship for your child! It is our goal to support you and your family in this way. A completed application is required to approve a scholarship. **Kindly initial each requirement as understood and provide documents as required for an accepted scholarship.** All the best to you and your family!

\_\_\_\_ **Scholarship per Skill Building Policy**

\_\_\_\_ **Review and agree to Skill Building Scholarship Policy**

\_\_\_\_ **BGYA Student Enrichment / Application Form**

\_\_\_\_ **Proof of Residency Document (provide one of the following)**

- Copy of parent/guardian's driver's license
- State ID
- Recent utility bill
- Property tax invoice

\_\_\_\_ **Proof of Income/Financial Support (provide one of the following)**

- Copy of Bridge Card
- Copy of Social Security statement (SS# blocked off)
- Free & reduced lunch document
- Copy of signature page of parent/guardian most recent tax return (SS# blocked off)

\_\_\_\_ **Activity Flyer Student is asking for Scholarship**

\_\_\_\_ **Completed Application must be return ASAP to be enrolled in program To:**

BGYA Office or Brandon Recreation Office/drop box

BGYA will date the application upon receipt of a completed application

**OFFICE USE ONLY**

\_\_\_\_\_ **BGYA Office Secretary approval**

\_\_\_\_\_ **Skill Building Committee member approval**

\_\_\_\_\_ **Chairperson Board of Directors approval**

**Strengthening Families Through Community Involvement**

Approved YES \_\_\_\_\_ NO \_\_\_\_\_ Amount \_\_\_\_\_ Date \_\_\_\_\_

**SKILL BUILDING APPLICATION CHECKLIST**

# BRANDON GROVELAND YOUTH ASSISTANCE SKILL BUILDING APPLICATION

DATE \_\_\_\_\_

**ACTIVITY REQUESTED** \_\_\_\_\_

STUDENT NAME AND AGE \_\_\_\_\_ **DOB** \_\_\_\_\_

SCHOOL OR HOME SCHOOL ATTENDING AND GRADE \_\_\_\_\_

PARENT OR GUARDIAN NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

**PHONE NUMBER** HOME \_\_\_\_\_ CELL \_\_\_\_\_

**EMAIL ADDRESS** \_\_\_\_\_

( for contact, surveys, and further programs)

RACE CIRCLE ONE      WHITE      AFRICAN AMERICAN      ASIAN

AFRICAN AMERICAN/WHITE      HISPANIC      MULTI-RACIAL

OTHER \_\_\_\_\_

**FREE OR REDUCED MEALS**      YES      NO

**HOUSEHOLD INCOME \$** \_\_\_\_\_ (if "NO" above documentation of income required)

**NUMBER IN HOUSEHOLD** \_\_\_\_\_

IF SINGLE PARENT FAMILY CIRCLE ONE      FEMALE      MALE

SIGNATURE PARENT OR GUARDIAN \_\_\_\_\_

**COPY OF DRIVERS LICENSE , AND FLYER OF PROGRAM REQUIRED**

HOW DID YOU HEAR ABOUT OUR PROGRAM CIRCLE ONE      SCHOOL      NEWSPAPER      WEBSITE  
CASE WORKER OTHER \_\_\_\_\_

I HAVE READ AND AGREE WITH THE SCHOLARSHIP POLICY      YES      NO

Approval BGYA Secretary \_\_\_\_\_ Date

Approval BGYA Chairman \_\_\_\_\_ Date

**Photo/Video/Audio Release**  
**Form**

I, \_\_\_\_\_ hereby authorize and grant permission to the Brandon Groveland Youth Assistance (BGYA) to use, reproduce, and publish photographs, video and audio recordings or any other images of me, including any of my images, likenesses, and voices, without compensation. I understand that these photographs and video/audio recordings may be used by BGYA for publicity or promotion in any print or electronic format or other format or media, including, but not limited to, newsletters, brochures or other publications, public affairs releases, recruitment materials, broadcast public service advertising (PSAs), and the website or social media sites of BGYA. I hereby release the BGYA and its officers, agents, and employees from all claims relating to the release, use, reproduction or publication of any photographs, audiovisual materials or other images by signing this Photo/Video/Audio Release Form.

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

**Printed Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

<p><b>For persons under the age of 18, the permission of a parent or guardian is required.</b></p> <p>I hereby represent that I am the parent or legal guardian and grant permission to the Brandon Groveland Youth Assistance (BGYA) to use, reproduce and publish photographs, and video and audio recordings of my child, and to use the name of my child, as outlined above.</p> <p>Name of Child under 18: _____</p> <p>Signature of Parent or Guardian: _____</p> <p>Printed Name of Parent or Guardian: _____</p>
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