

# Fort Wayne Sports Foundation Athlete Development Grant Program

**Before YOU Apply** *Please read the following eligibility requirements and guidelines prior to submitting an application.*

## Program Goal

To enhance collegiate scholarship opportunities or the reaching of Olympic potential for select local youth, by providing financial support based upon a demonstrated level commitment, performance, and financial need.

## Program Uses

Our program is targeted for use in two ways:

1. Individual athletes hoping to advance their training by participating in summer club programs or receive additional coaching through advanced skills training camps operated by a National Governing Body. (Please refer to the Certification and Eligibility Information below for details about NCAA eligibility guidelines.)
2. Individual athletes seeking money for advanced training expenses directly related to future participation in national championship events with the ability to earn a spot on a National Team for competition in the Olympic or Paralympic games.

## Residency

Applicant must have residence in or have training taking place in Allen, Adams, Huntington, Wells, Noble, DeKalb, Whitley or Steuben Counties.

## Age Requirement

Applicants of all ages will be considered.

## Selection Criteria

- A. Financial Need
- B. Athletic Ability
- C. Desire to compete at higher level/Commitment to sport

These criteria are discussed in greater detail below.

### **A. Financial Need**

Funding determinations will be based on the financial need of the applicant. The amount of each grant may vary according to the applicant's need and availability of program funds.

Previous funding neither increases nor decreases an applicant's chance of funding the following year. Grant installments must be sent to a not-for-profit (NFP) entity such as a National Governing Body (NGB) or local club that has attained NFP status. Money will not be sent directly to the athlete.

A detailed outline must accompany your application telling of planned usage of the grant. Additional guidelines for the use of grant monies are included in this document

### **B. Athletic Ability**

Athletic ability will be evaluated on a case-by-case basis. To be considered for receipt of this grant, we need letters of recommendation from your current coach and also :from the organization that we will be paying the grant to (your NGB or club sport coach/board president). Any pertinent information such as details of your competition history, awards and training should be included in this application.

### **C. Desire and Commitment**

This will be measured by the information provided by your answers on your application and your recommendations from any coaches and representatives of the not-for-profit entities with which you are attempting to become affiliated. Athletes will be expected to attend at least 80% of scheduled practices and competitions.

# Fort Wayne Sports Foundation Athlete Development Grant Program Grant Application Guide

This guide is designed to assist you in completing the following application

## I. Applicant Data

### A. Residency

The Future Athlete Development Grant Program was created to support Hoosier athletes in Northeast Indiana. For this reason, residency in this region is a requirement for all grant recipients.

For the administration of this grant program, athletes living in Allen County and all counties immediately adjacent to Allen are considered Northeast Indiana. Specifically, Allen, Adams, Huntington, Wells, Noble, DeKalb, Steuben and Whitley Counties are the eligible counties of residence.

Residence is defined as an individual living in the state of Indiana for the last 12 months and must have a reason to live in Indiana other than for education and/or athletic training purposes and preparations. A residence is a place where a person has voluntarily fixed as a permanent habitation with intent to remain in such place for an indefinite period. The residence of an unemancipated person under 21 years of age follows that of the parents or the legal guardian who has actual custody or administers the property of such person. In the case of divorce or separation, **if** either parent meets the residence requirements, the applicant will be considered a resident.

Upon moving to Indiana, a person does not immediately acquire state residency. Such person must be a resident for at least twelve (12) months at the date of application in order to qualify for the Athlete Development Grant Program.

### Exclusions

Physical presence in Indiana for the predominant purpose of attending a college, university or other institution of higher learning; or for a training center operated by a USOC National Governing Body; or for a national-level club or training program shall not be counted in determining the twelve (12) month period of residence, nor shall absence from Indiana for such purpose deprive a person of resident status.

### Example: Eligible Athlete

John Doe is from Indiana. He trains part of the year in Florida and part of the year in Indiana. He declares Indiana (in Allen, Adams, Huntington, Wells, Noble, DeKalb, or Whitley County) as his permanent residence on his Federal Income Tax Return.

*\*\*\*Using the residency guidelines, John Doe is eligible to apply for an Athlete Development Grant, as he is a legal resident of Indiana.*

## II. Experience – Sport Specific Information

### A. Experience

Describe your experience within your sport. **Many eligible sports are listed below. Be sure to include** special training, competitions and specific achievements, such as rank (if applicable), records or awards.

|  |   |                     |
|--|---|---------------------|
| Archery  | <b>Field Hockey</b>                                       | Speedskating        |
| <b>Badminton</b>                                       | <b>Figure Skating</b>                                     | <b>Swimming</b>     |
| Baseball   | <b>Gymnastics (Artistic, Rhythmic, Trampoline) Hockey</b> | <b>Snowboarding</b> |
| Basketball   | <b>Softball</b>   | Synchronized        |
| <b>Swimming</b>  | Judo  | Fencing             |
| Biathlon   | Luge  | <b>Table Tennis</b> |
| Bobsled  | <b>Modern Pentathlon</b>                                  | Taekwondo           |
| Boxing   | Rowing  | <b>Team</b>         |
| <b>Canoe &amp; Kayak (Slalom, Sprint)</b>              | Sailing   | <b>Handball</b>     |
| Curling  | Shooting  | Tennis              |
| <b>Cycling (Road, Mountain Bike, Track)</b>            | <b>Volleyball (Beach, Indoor)</b>                         | Weightlifting       |
| <b>Skiing (Alpine, Jumping, Cross-Country)</b>         | <b>Soccer</b>   | Triathlon           |
| <b>Equestrian (Dressage, Jumping, Three-day Event)</b> | <b>Wrestling (Freestyle, Greco-Roman)</b>                 | <b>Diving</b>       |
| <b>Athletics (Track &amp; Field)</b> ..                |   | <b>Water Polo</b>   |

U.S. participating sports eligible for the Paralympic Games are the following:

|                       |   |               |
|-----------------------|---|---------------|
| Alpine Skiing         | Equestrian                                | Soccer        |
| Archery               | Fencing                                   | Swimming      |
| Basketball            | Goalball                                  | Table Tennis  |
| Biathlon              | Ice Sledge Racing                         | Tennis        |
| Boccia                | Judo                                      | Track & Field |
| Cross Country Skiing  | Powerlifting                              | Volleyball    |
| Cycling (Track, Road) | Sailing ( <i>sitting &amp; standing</i> ) | Rugby         |
| Shooting              |   |               |

### B. Competitions

List the local, national and international competitions and training camps in which you have participated, including the location, date and place finished..

## III. Financial Information

### A. Tax Forms

Applicants must attach copies of their most recent Individual Federal Income Tax Return (with Social Security Number redacted) on which they were declared a dependent, i.e., parent, guardian, and/or spouse (whether filed jointly or separately). Please include copies of the most recent W-2 forms (if applicable). These records will be kept strictly confidential.

### B. Allocation of Grant Request

Please indicate the total amount of funding you have requested and how this amount will be allocated to the general areas listed. Please be as specific as possible as much weight will be placed on accuracy and legitimacy of requested uses of grant monies, specifically for traveling expenses and equipment.

Example: John Doe (Figure Skater)

Grant Request: \$1,500

Training Fees: \$500; Living Expenses: \$0; Medical: \$500 (if related to competition)

Equipment: \$300; Travel Expenses: \$200

In the next section, please indicate how you arrived at the figures above, using specifics.

Example: John Doe (Figure Skater) *continued*

Training fees: \$500: This money will be used to pay for coaching costs, rink fees and training camps. The \$300 for equipment will be used for skates. The travel expenses of \$200 will be used for hotel accommodations during competitions, and for the cost of driving to competitions.

#### C. Personal/Unusual Circumstances

Please explain any unusual or special circumstances that may not be apparent in your application or attached documents and should be used by the reviewers to help determine your financial need. Such circumstances may include health conditions, unemployment, family difficulties or children.

#### D. Additional Financial Assistance

Please indicate whether you are receiving financial assistance from NGBs, USOC, corporations or payment for personal appearances. Also include any in-kind services you may be receiving.

Example:

Olympic Job Opportunity Program sponsorships, work release program for training/competition, provided housing, equipment payment for personal appearances or uses of transportation such as car rentals or airline travel furnished for traveling needs.

### IV. Nominator

Applicants must be nominated for funding by a coach or athletic director from the school you attend or an officer or coach of the club team you wish to join. The nominator's signature is required to process the application in order to avoid any conflict of interest.

### V. Certification and Eligibility Information

Please note that it is likely that by accepting this grant an athlete's college eligibility may be affected. As this grant is made out to an individual and this athlete plans to participate in intercollegiate sports at a Division I school, the NCAA advises you to consult with the college coach or compliance officer to determine whether funding through this grant program will affect eligibility. The NCAA regulations are technical and must be interpreted by the NCAA or your college to determine eligibility in your specific circumstances.

In most cases, Division I student athletes will be unable to accept funding unless the grant funds are approved by the athlete's National Governing Body (NGB) or the U.S. Olympic Committee. It is your responsibility to check the financial aid regulations of the NCAA or sports organization governing your current or future high school, college or university to avoid jeopardizing your eligibility for sports participation.

Phone numbers for the IHSAA and NCAA are listed below:

IHSAA: (317) 846-6601

NCAA: (317) 917-6222

Sign the application, date it, and have your nominator do the same. Then forward to the following address:

Fort Wayne Sports Corporation  
P.O. Box 12445  
Fort Wayne, IN 46863

(Athletes are expected to submit a follow up report to the Foundation outlining how the grant money was spent.)

### **General Information**

Grant payments will be to the local club with which you wish to participate. Athlete Development Grants are not intended as the sole source of income for athletes. Grants are made for one funding cycle only during a 12-month period. Previous funding neither increases nor decreases an applicant's chance of funding the following year.

### **Liability Clause**

We assume no responsibility regarding any current or future eligibility with regards to participation as an NCAA, NAIA, NJCAA or IHSAA athlete.

***Fort Wayne Sports Foundation  
Athlete Development Grant Program Application***

Please use the attached Grant Application Guide to assist in completing this application. Please print or type application. Duplicates of the application will be accepted. Faxed and Emailed applications will not be accepted. **Deadline—July 15, 2013.**

Applicant Data

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
City \_\_\_\_\_ **State** \_\_\_\_\_ Zip \_\_\_\_\_ Date of Birth    /    /    Male    Female  
E-mail **Address**-----

Indiana resident for \_\_\_\_\_ years (see Eligibility Requirements regarding residency guidelines.)

If you recently moved to Indiana, please explain your reason(s) for relocation: \_\_\_\_\_  
\_\_\_\_\_

Parent, Guardian or Spouse Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Social Security# \_\_\_\_\_  
Relationship to **Applicant**-----

Junior High School or High School Data (Please list where you most recently attended)

School Name \_\_\_\_\_ **Address**-----  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone Number \_\_\_\_\_ **Coaches Name**-----  
**Athletic Directors Name**-----

Experience -Sport Specific Information

Please list the sport you participate in and describe your athletic experience in that sport, including recent experiences and recent awards received (You may attach a separate sheet if needed. )

Sport: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

During the next funding cycle (12 months), list what competitions you plan to compete in (if any):

Location

|       |       |       |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Please list your personal best time/distance/score from an official event (*if applicable*): \_\_\_\_\_

Event and Location: \_\_\_\_\_ Date: \_\_\_\_\_

Describe your athletic goals for the next year:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Financial**

Total Amount Requested: \$ \_\_\_\_\_

How will this amount be allocated to the following areas?

Club Membership/Coaching/Training Fees \$ \_\_\_\_\_ Living Expenses \$ \_\_\_\_\_ Travel Expenses \$ \_\_\_\_\_

Equipment \$ \_\_\_\_\_ Medical Expenses \$ \_\_\_\_\_ (All expenses **must be related to competition.**)

Specifically describe how these funds will be used:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you employed? \_\_\_\_\_ If so, what do you \_\_\_\_\_

Report any personal, family, or financial circumstances which may warrant consideration. You may wish to include such circumstances as disabilities, family separation, financial hardship, and loss of employment or unusual personal and/or family responsibilities:

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Are you currently receiving reduced rates, financial assistance or other grants from your local governing body, NGB, USOC, corporations or payment for personal appearances? (This includes any in-kind service you may be receiving) Yes \_\_\_\_ No \_\_\_\_

If yes, explain? Is this reflected on your enclosed tax form?

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Have you applied for other grants? Yes \_\_\_\_ No \_\_\_\_

Have you received other grants? Yes \_\_\_\_ No \_\_\_\_

If so, please detail year and amount received:

| <u>Grant Name and Details</u> | Year | Amount |
|-------------------------------|------|--------|
|-------------------------------|------|--------|

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How did you find out about the Fort Wayne Sports Foundation Athlete Development Grant Program?

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### **Nominators**

Please provide accurate information and signature from a nominator representing the club/team you wish to join or a representative from the school you currently attend (either your current coach or athletic director).

Name \_\_\_\_\_ Title: \_\_\_\_\_

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Affiliation: \_\_\_\_\_

\_\_\_\_\_  
Signature of Nominator

\_\_\_\_\_  
Date

**Certification and Eligibility**

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. I am aware that falsification of this information will result in termination of any funding granted.

I further state that I have contacted the proper athletic organizations and have taken responsibility for determining whether an Athlete Development Grant could affect my eligibility for competition.

**Applicant's Signature**----- **Date** \_\_\_\_\_