Phone: 574-825-5666
Fax: 574-825-8117
Email: programs@lovewayinc.org

Scholarship Application

Updated 10/29/2026

Participant Info

Participant's Name: _____

If awarded scholarship, I (parent/other) will assist by:

☐ Fundraising ☐ Volunteering in class ☐ Helping maintain equipment/property ☐ Cleaning

☐ Other: _____

Financial Info

What is the combined income for all individuals living in your household? _____

How many people are living in your household? _____

Please attach the following:

1. Letter from parent/guardian about financial need and desired need of scholarship **or** letter from participant about desire to participate/ride at LoveWay and any related goals.
2. Proof of income, including most recent income tax return and W2s.

Agreement and Signature

By signing below, I am indicating that I have the ability to transport the above participant to LoveWay for lessons. Further, I represent and warrant that the information provided herein is true and accurate. I acknowledge and agree that should I falsify any information on this application, LoveWay shall have the right to revoke any awarded scholarship.

Legal Representative Signature: _____ Date: _____

Legal Representative Printed Name: _____

Financial Aid Policy

- It is the policy of LoveWay's Board of Directors that each participant accepted into the program, regardless of ability to pay, has access to our services.
- LoveWay has an obligation to our donors to ensure scholarship funding is well managed and appropriately spent. Thus, it is LoveWay's policy that the Program Coordinator reviews all requests for financial aid via the Scholarship Application.
- All applicants must complete **the entire application** to be considered for assistance.
- ALL INFORMATION WILL BE KEPT CONFIDENTIAL WITHIN LOVEWAY ADMINISTRATION.
- New Requests: Initial applications may be submitted at any time. Please allow 2 weeks for the review of the application.
- Renewal Requests: Applications are required to be filed annually for the program year beginning August 1st. Please allow 2 weeks for the review of the application.
- Scholarships are provided based on financial need, participant goals, potential benefit, and participant and/or parent/guardian commitment to assist at LoveWay.
- LoveWay determines financial eligibility using the U.S. government's *Child Nutrition Programs Income Eligibility Guidelines.*
- Scholarships are considered only when accompanied with proof of income.
- LoveWay scholarships are applied as a percentage discount.
- LoveWay reserves the right to rescind scholarship awards at its sole discretion.
- LoveWay reserves the right to waive specific requirements on a case-by-case basis.

FOR OFFICE USE ONLY

Scholarship: ☐ Awarded ☐ Declined ☐ Unavailable

Scholarship level: ☐ 0% ☐ 45% ☐ 60% ☐ 75% ☐ 90% ☐ 100% (Free)

Parent/Participant notified date: _____

Approved by: _____