

# Cedar Stars Soccer Academy Financial Aid Application 2024-25 Season

We understand that soccer can be an expensive sport. We are committed to offering the highest quality programming at the most affordable price. Our goal is to offer the highest value possible for every dollar spent on soccer. Cedar Stars Soccer Academy is pleased to offer a Financial Aid program to help families offset club fees. The club has a limited number of financial aid available and the number of players receiving aid and the amount of the aid will vary depending on the funds available.

In order to be considered for a Financial Aid scholarship, applicants must have been offered and accepted a roster spot on one of our Cedar Stars Soccer Academy teams. The player must be registered and have paid a deposit to the club. The deposit is required before the application can be approved. This can be done by checking the acceptance email that was sent to your email from Blue Sombrero.

If financial aid is awarded it reduces monthly club fees, financial aid does not cover 100% of club fees. All scheduled payments must be made until notified that financial aid has been awarded.

\*\*Team fees, travel expenses, club volunteer hours will be at the expense of the player.

#### FINANCIAL AID GUIDELINES/CRITERIA/ELIGIBILITY:

#### **Guidelines:**

- 1. Financial need must be demonstrated for consideration. Economic hardship will be the only factor in awarding Financial Aid. No one will be disqualified from consideration because of sex, race, color, creed or religious beliefs.
- 2. While we try to address as much of the need as possible, Financial Aid amounts will be based on the number of players demonstrating need, the extent of that need and the budget available for Financial Aid that year.
- 3. Financial Aid awards will be reviewed on a yearly basis or in the event they join after the start of a season.
- 4. **NO** player will receive financial aid for 100% of their tuition fees
- 5. Any unpaid league fees from prior seasons will result in an applicant being ineligible for Financial Aid.
- 6. It is suggested that Financial Aid recipients volunteer their time back to the club when requested.
- 7. Applications MUST be received by 08/18/24 (2018 2011 Players) or they will not be considered. For 2010 2005 Birth Year, we will consider applications up until 01/31/25.
- 8. Applications that are not filled out completely will not be considered.
- 9. Applications must be filled out by the parent/guardian requesting aid. Applications cannot be filled out by coaches, team managers, children or friends.
- 10. Qualify based on USDA household income guidelines for the current year (chart below)
- 11. If a player decides to leave us in the middle of the season for another club, the full balance is due unless proof that they are relocating to a different state is provided.



#### 2024-25 Poverty Guidelines for the 48 Contiguous States & District of Columbia

Number of Persons in Family/Household	Poverty Guideline
1	\$15,060.00
2	\$20,440.00
3	\$25,820.00
4	\$31,200.00
5	\$36,580.00
6	\$41,960.00
7	\$47,340.00
8	\$52,720.00

Reference Source: <a href="https://aspe.hhs.gov/poverty-guidelines">https://aspe.hhs.gov/poverty-guidelines</a>

#### Financial Aid Criteria/Eligibility:

- Family needs
- Number of children in a family
- Number of players in CSA Soccer
- Family Income
- Overall Financial Situation
- The player applicant must be a full-time student with a GPA of 2.0 or above

After Financial Aid is awarded, the remaining balance of player registration fees must be paid in full by February 15th, 2025 unless an approved payment schedule is in place. Failure to maintain good financial standings with CSA will result in a player being ineligible to participate in practice and games.

<sup>\*\*\*\*</sup> The 2024-25 poverty guidelines are in effect as of January 13, 2024

<sup>\*\*\*</sup> For families/households with more than 8 persons, add \$5,380.00 for each additional person.



#### INSTRUCTIONS FOR COMPLETING THE FINANCIAL AID APPLICATION FOR CSA:

#### **Documents Needed:**

- 1. Complete all requested information on the application for financial aid.
- 2. Attach a copy of completed IRS 1040 form (front and back) from the most recent tax year
- 3. Copy of a valid photo ID
- 4. Copy of a utility bill matching the address on the government ID
- 5. Proof of most recent semester report card

### Signature & Mailing:

- 1. Sign and date the form. Please make sure all the above documents are included. **No application** will be reviewed unless we have all five documents submitted and deposit is made. <u>NO EXCEPTIONS!</u>
- 2. Send or drop off the application for Financial Aid to Cedar Stars Academy at:

Cedar Stars Academy, 3 Empire Blvd. South Hackensack, NJ 07606 RE: Financial Aid Board

Financial Aid Applications are Due No Later than August 18th

## Application for Financial Aid

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Νč	ame of Player(s)	in CSA:		
1.	Player's Full Name	e (Print)	Member Since:	
	Current Team & A	ge Group		
2.	Player's Full Name	e (Print)	Member Since:	
	Current Team & A	ge Group		
3.	Player's Full Name	e (Print)	Member Since:	
	Current Team & A	ge Group		
Na	ame of Parents or	Legal Guardian:		
Fa	ther: First	Last		
Mc	other: First	Last		



Zip Code	City, State
Email	Best <b>Phone Number</b> to Be Reached At
The following questions will be used solel	y to help determine need for financial aid:
How many children or total dependents do yo	u support in your household?
Financial Aid is for the year of:	
Please check one of the following ranges for	yearly household income:
Less than \$20,000	
\$21,000 to \$50,000	
\$51,000 to \$100,000	
\$100,000 +	
Please describe your need for financial aid be	elow:
Cedar Stars Academy cannot guarantee fit the status of your application upon review	nancial aid for all applicants. You will be notified of
By signing, I attest that the documents and in	formation provided for Financial Aid review is accurate:
Signature of Parent or Guardian Completing	Application Date



## For Office Use Only (below this line)

This scholarship/Financial Aid was reviewed on: (Date) Division:
Name of Player (s):
Age Group:
Parent's Name:
Parent's Contact number:
Photo ID:   Yes   No   Income Tax:   Yes   No   Utility Bill:   Yes   No   No   Statement:   No   Yes   No   No
Most Recent Report Card: Yes No
Total Cost of Program:
Member Since: Accounting Dept Balance as of:
Sibling(s) in the Club:   No Sibling(s) Name:
Child of Staff:   No Staff's Name:
Previous Financial Aid:   Yes   No
Which season they received Financial Aid if yes:
Asked for Coach rating:   No
Coaches Name for team:
Coaches Rating: Number of players on Roster:
□□Accepted □□Partial Payment: □□
□□Payment Installments:
□□Rejected Reason for rejection:
GM/Divisional Manager Signature Date
Club Executive Director Signature Date
Parent Volunteer (For any team):   No
Parent will be notified about balance either by:   Phone Call  Email
Date Meeting was held: