



Cedar Stars Soccer Academy Financial Aid Application – North Division 2023-24 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 08/14/23 (2017 – 2010 Players) or they will not be considered. For 2009 – 2004 Birth Year, we will consider applications up until 01/31/24.**
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.



2021 Poverty Guidelines for the 48 Contiguous States & District of Columbia

<i>Number of Persons in Family/Household</i>	<i>Poverty Guideline</i>
1	\$12,880.00
2	\$17,420.00
3	\$21,960.00
4	\$26,500.00
5	\$31,040.00
6	\$35,580.00
7	\$39,120.00
8	\$44,660.00

Reference Source: <https://aspe.hhs.gov/poverty-guidelines>

**** The 2021 poverty guidelines are in effect as of January 13, 2022

*** For families/households with more than 8 persons, add \$4,540 for each additional person.

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, 2024 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.



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. NO EXCEPTIONS!**

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 30th

Application for Financial Aid

Name of Player(s) in CSA:

1. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____
2. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____
3. Player's Full Name (Print) _____ Member Since: _____
Current Team & Age Group _____

Name of Parents or Legal Guardian:

Father: First Last

Mother: First Last



Home Street Address:
Zip Code

City, State

Email

Best **Phone Number** to Be Reached At

The following questions will be used solely to help determine need for financial aid:

How many children or total dependents do you 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 below:

Cedar Stars Academy cannot guarantee financial aid for all applicants. You will be notified of the status of your application upon review.

By signing, I attest that the documents and information 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 **Statement:** Yes No

Most Recent Report Card: Yes No

Total Cost of Program: _____

Member Since: _____ **Accounting Dept Balance as of:** _____

Sibling(s) in the Club: Yes No **Sibling(s) Name:** _____

Child of Staff: Yes No **Staff's Name:** _____

Previous Financial Aid: Yes No

Which season they received Financial Aid if yes: _____

Asked for Coach rating: Yes No

Coaches Name for team: _____

Coaches Rating: _____ **Number of players on Roster:** _____

Accepted Partial Payment: _____

Full Payment: _____

Discount: _____

Payment Installments: _____

Rejected _____ Reason for rejection: _____

GM/Divisional Manager Signature _____ **Date** _____

Club Executive Director Signature _____ **Date** _____

Parent Volunteer (For any team): Yes No

Parent will be notified about balance either by: Phone Call Email

Date Meeting was held: _____