# Beach Cities Alpha Scholarship Guidelines and Application - 2025-2026 Season

Scholarship % Calculation Table:

	Total Number in Household									
	1	2	3	4	5	6	7	8		
80%										
Scholarship	\$31,850	\$36,400	\$40,950	\$45,450	\$49,100	\$52,750	\$56,400	\$60,000		
50%										
Scholarship	\$53,000	\$60,600	\$68,150	\$75,750	\$81,800	\$87,850	\$93,900	\$100,000		
20%										
Scholarship	\$84,850	\$96,950	\$109,050	\$121,150	\$130,850	\$140,550	\$150,250	\$159,950		

The above table is based on the HUD Income Limits for 2025 used in the Los Angeles/Long Beach/Glendale Metro Area. The 80% line is "Extremely Low Income", 50% is "Very Low Income", and 20% is "Low Income"

To use the above table, select the column that indicates the number of dependents in the household **plus parents** living in the same household. Once you find the correct column, using the amount reflected on the "Adjusted Gross Income" of your most recent return (this amount appears on the last line on page 1 of your Federal Income Tax Return -Line 11 on the 1040, and go down to the line that best matches your AGI without going over and this will be the maximum% of a scholarship that can be granted. Example: A family of four (2 parents and 2 kids) with an AGI of \$50,000 would be qualified to apply for a 50% Scholarship.

## Please fill in the below:

Amount on IRS Tax Return (Line 11 Form 1040)	\$		
Number of dependents and parents in the Household			
Maximum scholarship %	%		
1. Swimmer's Name			
2. Group Monthly Billing <sup>1</sup>	\$	\$	\$
3. Max Scholarship %	%	%	%
4. Maximum Scholarship Amount \$ (line 2 x line 3)	\$	\$	\$
Total Monthly Scholarship Request (add	\$	the request is ove amount then the	of \$1,300 per year, if er the max. per family max discount will be twelve months of

#### Footnote:

1. See team website for <u>current monthly billing amounts by training group</u>

### **Scholarship Application Requirements:**

- 1. Provide a complete copy (include schedule C for any Business-related income reported) of the last income tax return filed in the (must be within the last two years).
- 2. Scholarships are for Program Dues only (BCAlpha Annual Registration Fees, and other related swim fees and equipment chargebacks are excluded from support).
- 3. Limited funds are available for scholarships each swim season. The guidelines provide the committee a process to rank applicants against the team's current scholarship funds. There is an annual family cap this year. The cap is adjusted to be no more than 10% of the total annual scholarship budget.
- 4. Starting with the 1st swimmer at 100% of their max scholarship amount, each additional family swimmer would have a reduction in coverage, the 2nd swimmer would be a max 50% of 1st swimmer award, the 3rd swimmer would be a max 50% of the 2nd swimmer, and so on with total family limited by point 3 above family cap.
- The applicant shall provide a letter with the amount that the applicant can provide with respect to amounts not covered by the scholarship. This will include any child support and support from extended family members.
- 6. Scholarships are awarded for each period Program Fees are billed with first preference given to those awarded in a prior period during the swim season. Renewal is not guaranteed and based on the current club financial position.
- 7. As with all BCAlpha families, the families of scholarship swimmers are expected to provide volunteer time to the club. This includes the following requirements: timing at swim meets, fulfillment of volunteer requirements at home swim meets and participation in the Swim-A-Thon. Additional donations of time and energy are encouraged.
- 8. Applicants must apply on an annual basis (by August 15th of each year before the new season starts) or at the time they join. Registered and continuing swimmers will have a priority over new or unregistered swimmers those that are pending their registration on receiving a scholarship)
- 9. All applications are treated individually and confidentially.
- 10. As a condition of their award, BCAlpha scholarship recipients agree to attend practices and meets on a regular basis as per their group level. Failure to comply with the condition may result in the loss of the scholarship. Scholarship recipients are encouraged to review the training and meet expectations for their respective groups, as scholarship recipients are reviewed each quarter against the funds available.

# **Scholarship Application**

Parent Name:			
	Last	First	MI
Address:			
City/State/Zip:		<del></del>	
Phone Number:	· · · · · · · · · · · · · · · · · · ·		
Email Address:	· · · · · · · · · · · · · · · · · · ·		
Swimmer #1 Name:	Last	First	MI
Roster Group:		Birthdate:	
Swimmer #2 Name:	 Last	First	MI
Roster Group:		Birthdate:	
Swimmer #3 Name:	 Last	First	MI
Roster Group:		Birthdate:	

Send the completed application and supporting documents to:

By email: billing@beachcitiesswimming.com