

**RIO Vista FC  
Scholarship Application**

Date \_\_\_\_\_  
Soccer Season \_\_\_\_\_

**Administrator: Joe Barreda [jfbarreda@msn.com](mailto:jfbarreda@msn.com), 822-8791**  
**Mailing Address 8204 Mosquero -E Albuquerque 87109**

*RVFC Statement: All applications will be taken into consideration based on availability of money for scholarships; number of applications received for current season; financial needs of applicant; number of children in the family playing RVFC soccer; family and player's commitment to RVFC and players team. This application does not guarantee a scholarship; applicants will be notified of status in a timely manner. Rio Vista FC is an equal opportunity club. It forbids discrimination on the basis of the race, religion, sex, nationality, age and health needs. RVFC will keep all information provided below CONFIDENTIAL.*

RVFC Soccer Team \_\_\_\_\_ RVFC Coach \_\_\_\_\_

Soccer Player's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Soccer Player's Address \_\_\_\_\_

Father/Guardian Name \_\_\_\_\_ Father/Guardian Email \_\_\_\_\_

Father/Guardian Day Phone \_\_\_\_\_ Evening Phone # \_\_\_\_\_

Father/Guardian Occupation \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_ Mother/Guardian Email \_\_\_\_\_

Mother/Guardian Day Phone \_\_\_\_\_ Evening Phone # \_\_\_\_\_

Mother/Guardian Occupation \_\_\_\_\_ Number of immediate family members \_\_\_\_\_

Are you a single income family? \_\_\_\_\_ Yes \_\_\_\_\_ No

Names and age of children you support currently playing in the Rio Vista Football Club:

---

**\*\*\*\*\* PLEASE NOTE BELOW \*\*\*\*\***

**FAMILIES WITH AN INCOME OF \$65,000 AND ABOVE WILL NOT BE CONSIDERED FOR SCHOLARSHIP UNLESS THERE ARE EXTENUATING CIRCUMSTANCES**

**Scholarship application will not be accepted if the application is incomplete. Deadline July 10<sup>th</sup>**

**THE ITEMS BELOW ARE MANDATORY. INFORMATION MUST BE ENTERED WITH AN ATTACHED INCOME STATEMENT IN ORDER FOR THE APPLICATION TO BE CONSIDERED FOR REVIEW.**

**Father/Guardian Annual Income \$ \_\_\_\_\_**

**Mother/Guardian Annual Income \$ \_\_\_\_\_**

**Attached Income Statement**

---

Please fill in Current RVFC fees. Scholarships that are granted may be distributed in partial fees, which may not cover the entire fees. Please list what you could afford to pay.

**NOTE: Partial Scholarships only- Remaining amount of fees must be paid IN FULL by end of the Fall Season.**

RVFC Fee -- Amount family could contribute \$\_\_\_\_\_ Current RVFC Fee is \$\_\_\_\_\_

**Soccer Players Commitment:**

If I am provided scholarship money I will do my best to attend practices and games.  
I will also make an effort to be involved in all team activities and practice good sportsmanship.

\_\_\_\_\_  
Soccer Player's Signature Date

**Parents Commitment:**

If my child is provided scholarship money I will make my best effort to help my child attend practices and games. ALL FAMILIES MUST SUBMIT A ATTACHED LETTER WITH APPLICATION STATING WHY THEY BELIEVE THEY ARE DESERVING OF A SCHOLARSHIP. **IN ADDITION ALL FAMILIES RECEIVING SCHOLARSHIPS MUST VOLUNTEER ONE FULL DAY AT THE RIO OPEN SOCCER TOURNAMENT. THIS WILL BE CLOSELY MONITORED THROUGH THE CLUB REGISTRATION PROCESS**

\_\_\_\_\_  
Father/Guardian Signature Date

\_\_\_\_\_  
Mother/Guardian Signature Date

Are you currently volunteering any of your time to RVFC or any RVFC team? If so please list below details of your involvement and the names of teams you help.

**COACH MUST SIGN OFF BEFORE APPLICATION CAN BE CONSIDERED FOR REVIEW  
ALSO A LETTER OF RECOMENDTATION MUST BE INCLUDED**

**Coach Recommendation:**

I support and recommend \_\_\_\_\_ application for a RVFC scholarship.

Coach Name \_\_\_\_\_ Phone# \_\_\_\_\_ Email \_\_\_\_\_

Team Name \_\_\_\_\_ Gender \_\_\_\_\_ Age Group \_\_\_\_\_

\_\_\_\_\_  
Coach Signature Date