



UPPER ISLAND SOCCER ASSOCIATION

VIPL LEAGUE – HARDSHIP GRANT POLICY

Guidelines

- Children ages 11 to 18 are eligible for the grant.
- Grant monies of up to a maximum of \$300.00 per player, per season is to be used for the payment of sport participation: ie VIPL fees less the hardship portion or team uniform costs, ie: jerseys, shorts and socks, NOT tracksuits, bags, etc.
- Hardship funds do not cover league and/or team expenses, ie: travel, accommodation, and social functions.
- Club registration or Club select fees are not eligible expenses. Please see your Home Club Administrator for additional assistance for these costs.
- Only one application per player per calendar year may be submitted and to be paid out no later than 15 October of the current season.
- Applications must be received prior to October 15 of the current season.
- All teams to have a representative share in the Hardship Fund.

Coach Sponsor

- The coach sponsor should be familiar with the applicant's financial situation as their signature verifies the financial need of the family.
- It is the responsibility of the coach sponsor to ensure the application is complete and to forward it to the UISA Administrator. Incomplete applications will be returned.

Grant Distribution

- Once the completed application is received and reviewed by UISA, a cheque will be sent to either the team coach, manager or team treasurer as indicated in Section 3.
- Please keep a copy of this form for your records.
- Please allow a minimum of 15 days for the review of the application.
- Processing time will vary depending on the availability of funds.

VIPL LEAGUE – APPLICATION FOR HARDSHIP GRANT

Section 1: Athlete Recipient	
First Name:	Last Name:
Address:	
City:	Postal Code:
Home Telephone:	

Section 2: Coach Sponsor	
Amount Requested:	
Team:	
Coach:	
City:	Postal Code:
Home Telephone:	
Email:	

I have thoroughly read and understand the guidelines of the hardship grant and agree that this applicant meets the guidelines. I believe the family of this applicant has financial need and a grant would allow this child to participate in the VIPL League. I agree to participate in a brief telephone follow-up if required.

Section 3
Signature of Coach Sponsor:
Date:
Make cheque payable to:

For UISA Use Only	
Application No.:	Date:
Approved by:	
Approved Funding Amount:	Cheque No.: