



Swim for Gio Foundation
Scholarship Application Information
www.swim4gio.com



The Swim for Gio Foundation was created by Missy and Sal Castillo to spread awareness for drowning prevention after the family lost their beloved son Giovanni in a drowning accident. It is the mission of the Swim for Gio Foundation to serve the community and help prevent drowning related deaths and accidents so that no more children or families have to suffer. In order to accomplish this, the Foundation offers scholarships to provide survival swim lessons, fencing around pools, and free CPR classes.

ELIGIBILITY

Assistance is granted on the basis of financial need. We consider household income and number of dependents as the primary criteria. The Foundation will provide as many scholarships as possible yearly.

We believe that a sense of ownership is developed if the participant contributes to the cost of his/her involvement. Therefore, scholarship recipients may pay a small percentage of the program fees.

As of today, the ISR swim lessons are \$90 a week and the applicant's responsibility is \$10 a week. The Foundation will also pay the \$110 for the ISR registration fee. A scholarship granted for a pool fence pays 100%. CPR lessons are provided on a first come basis no income limit although the Foundation will request an application be filled out to be put on the list.

REQUIRED DOCUMENTS

Please provide a letter explaining why you need assistance with supporting documentation if applicable. Share any extenuating circumstances that you feel should be considered when your application is being reviewed.

A copy of the following documents must be provided to process the application. (For security measures please black out your SSN on all documents) Incomplete applications will not be accepted.

Driver's License (if applicable)

Two months of current pay stubs (an additional two from your spouse if applicable)

Or

Your most recent tax return.



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IF APPLICABLE PLEASE INCLUDE:

For a “Did Not File” taxes include an income form from Social Security benefits statement, disability benefit statement, unemployment benefit statement, student loan statement, child support statement etc.

SUBMISSION

Please send completed application and supporting documentation to swim4gio@gmail.com, or mail to Swim for Gio Foundation Inc., 31855 Date Palm, Suite 3-193, Cathedral City, California 92234.

Applications will be reviewed monthly and notification of receipt sent out to all applicants if an e-mail address is provided. Once an application has been approved, the instructor will be contacted, and you will be notified in a timely manner.

All financial information contained in the scholarship application will remain confidential, and will be destroyed after processing.



SWIM 4 GIO FOUNDATION, INC. APPLICATION:

Today's Date: _____

_____ Parent First Name Parent Last Name

____/____/____
Date of Birth

_____ Street Address
City

____ State ____ Zip Code

_____ Home Phone Number _____ Alt. Phone Number

_____ E-mail Address

LEGAL DEPENDANTS

Names Date of Birth:

Spouse: _____

Children: _____

REQUESTING SCHOLARSHIP FOR:

Child's Name: _____ Age: _____

New student or refresher



SWIM FOR GIO FOUNDATION, INC. INCOME INFORMATION

1) Total Monthly Income \$ _____

2) Other Income (child support, public assistance, etc.) \$ _____

Have you ever received a scholarship from the Swim for Gio Foundation, Inc.?

Yes or No

If yes, please explain:

What is your preference for lessons:

Morning _____ Afternoon _____ Evening _____ No Preference _____

How did you hear about The Swim for Gio Foundation? _____

PLEASE READ THE FOLLOWING AND SIGN BELOW:

I hereby certify that the information in this application is true, accurate and complete to the best of my knowledge. I am aware that it is my responsibility to notify Swim for Gio Foundation, Inc. in writing of any change in the information supplied on this application, as it may affect my eligibility for financial assistance. I understand that every part of this application must be completed and that I must provide adequate proof of income in order for my application to be processed. I understand that incomplete applications cannot be processed.

Signature of Applicant Date

Printed Name of Applicant

Signature of Spouse Date

Printed Name of Spouse