



City of Santa Clarita

SCORE Scholarship Program Policy – YOUTH

Santa Clarita's Opportunity for a Recreational Experience

IMPORTANT DATES

Winter 2026

Application Submission Period: Monday, October 27, at 8:00 a.m. - Thursday, November 6, 2025, at 5:00 p.m.

Notification: Monday, November 10 – Wednesday, November 26, 2025

(Online registration begins Tuesday, December 2, 2025, at 10:00 a.m. for all classes)

Funds Expire: Monday, November 10, 2026

CRITERIA & ELIGIBILITY

Criteria – The Recreation and Community Services division has a limited number of scholarships available for children. **All scholarships, regardless of requests received, are limited to available funds.**

- The amount of the scholarship awarded per child shall depend upon income-eligibility guidelines and for children, ages 5-17, living in the same household as the applicant. **The applicant must be the parent or legal guardian of the child.**
- Awardees are able to use their scholarship funds towards participation in recreational programs, classes, camps, and community centers. Not for use on Special Events.
- Additional costs (i.e., material fees, uniforms, merchandise, Season's gift certificates) will not be covered.
- Once awarded, all scholarship funds must be used within one year from the date issued or awarded.
 - If there is a remaining balance at the end of the year's deadline, those funds will be considered forfeited.
 - If a refund is requested, all SCORE funds will be refunded to the original payment method. SCORE funds have NO CASH VALUE. All applicants must adhere to the City of Santa Clarita's Registration Refund Policy.

Eligibility – Any resident within the City of Santa Clarita's jurisdiction is eligible to apply for a SCORE scholarship for children, ages 5-17, living in their household who meet the eligibility guidelines and provide all necessary documents (meal plan verification or verification of participation in a low-income program, see list of acceptable low-income programs in the application) within the application submission period.

APPLICATION PROCESS & INSTRUCTIONS

1. Verify residency status using the following link: <https://residency.santa-clarita.com>. The search must indicate "City" jurisdiction not "county."
2. Set up a family account in CivicRec using the following link: <https://santaclarita.gov/seasons>
3. Submit your completed SCORE application (one form for each legal guardian) and required documentation of participation in a low-income program by the submission period deadline. Late or incomplete applications will not be accepted. Apply online by visiting: santa-clarita.com/SCORE.
4. Your application will be processed and reviewed for approval. If approved, your household name may be entered into a lottery system and names may be randomly drawn until funds have been depleted.
5. If your family is selected, you will have one year to utilize those scholarship funds. Funds are non-transferable.
6. Applicants may re-apply the following year.
7. Families awarded scholarship funds will be given a unique code to use during checkout.
8. At registration time, you will have the option to pay with SCORE funds. If there is a balance remaining, you must pay the balance before you are registered for the class/program.

FOR QUESTIONS OR ADDITIONAL INFORMATION CONTACT (661) 250-3700.



City of Santa Clarita SCORE Scholarship Application – YOUTH

I. APPLICANT INFORMATION (Please print legibly)

The application must be completed by the applicant and signed in order to be considered to receive SCORE Scholarship funding.

Parent/Legal Guardian: _____

Address: _____

City: _____ Zip Code: _____

Email (used to log into the Registration program): _____

Home Phone: _____ Cell Phone: _____

a. Have you received SCORE funds before? Yes ☐ No ☐

b. City Residency: Yes ☐ No ☐

To check residency within the City limits log onto: <https://residency.santa-clarita.com>

c. Number of Children (ages 5-17) may require age verification such as birth certificate: _____

Name of Child(ren) ages 5-17 Print - first and last name	Relationship to applicant	Date of Birth

II. FAMILY INCOME

Family income includes pre-tax wages (gross) and income contributed to the family by the parents or legal guardians of the child/ren. Please add the monthly and yearly income at the end of the table.

Please fill in all applicable areas in the following table:

Income Type (BEFORE TAXES)	Monthly Amount	Yearly Amount
Wages from Work		
Gross Income from Self-Employment		
Rent Received from Tenant/Boarder		
Disability or Unemployment		

SSI, SSDI, or Other Social Security Benefits		
Alimony or Child Support		
Public Assistance (TANF, CalWORKs, GR)		
Retirement Income		
Veterans Benefits		
Annuity/Pension Payments		
Estate or Trust Fund Payments		
Income from Rental Property		
Other:		
TOTAL GROSS MONTHLY FAMILY HOUSEHOLD INCOME	\$	\$

III. REQUIRED DOCUMENTATION

NOTE: Applications submitted without the following REQUIRED documentation will be considered incomplete and will not be accepted.

RESIDENCY VERIFICATION

Submit one of the following for residency verification:

A copy of your California ID or Driver's License

OR

A copy (dated within the last 3 months) of a utility bill (SC Edison or Gas only) with the applicant's name to verify your address.

AND

LOW-INCOME VERIFICATION

Submit one from A, B, C or D for low-income verification:

- A.** Free or Reduced Meal Program from the local school district: A letter of acceptance from the school district with the current school year with each school-aged, child's name on the acceptance letter.

OR

- B.** Low-Income Verification – A letter of award or benefit with appropriate letterhead (NOT ID card) with the applicant's name and current year printed on the documentation from **ONE OF THE FOLLOWING** reputable government agencies that offer low-income programs:

CalFresh
CalWORKs
Medi-Cal or Medicaid
Subsidized Housing – Section 8
Supplemental Security Income Program (SSI)
Temporary Assistance for Needy Families through California CalWORKs (TANF)

OR

- C. Salary/Wages – Attach copies of the last two month’s wages for the applicant and spouse living in the same household.

OR

- D. Other verifiable government-issued documents illustrating qualifying income status.

Please indicate which of the **REQUIRED RESIDENCY AND LOW-INCOME DOCUMENTATION** from above, you are submitting with this application:

Residency Verification attached: _____

Low-Income Verification attached: _____

IV. CERTIFICATION

I, _____ acknowledge that qualification for the SCORE Scholarship Program is based upon having a qualifying family income level and appropriate documentation. I certify that the information provided is true and correct. I understand that my statements in this document may be subject to further verification by the City of Santa Clarita. I agree to provide the required supporting documents. I further understand that providing false or misleading information may result in being determined ineligible for current or future SCORE Scholarship opportunities. I have read and agree with the program policies.

Signature of Applicant: _____

Date: _____