

# The City of Ontario Community Empowerment Scholarship (C.E.S) Application and Eligibility for Seniors and Veterans

*For a limited time, the C.E.S. Scholarship will be available for children AND adults affected by the Covid-19 virus.*

The City of Ontario Community Empowerment Scholarship (CES) Program is made possible through donations and yearly fundraising efforts. This and other funding sources allow veterans and seniors who are low-income, the opportunity to participate in recreation classes, programs and activities that will enrich their lives and in turn, positively impact the community.

**Scholarships are awarded based on available funding and need. A completed C.E.S. Eligibility Application is required in order to be considered. One application per household, per funding year, may be submitted.**

**All applicants must be residents of the City of Ontario and abide by our department Code of Conduct Values throughout the application and funding process. Failure to do so may result in disqualification from the program. If applying for funds for a minor child, proof of permanent, legal guardianship will be required.**

## WHO IS ELIGIBLE?

1. Seniors or veterans who are currently receiving public assistance such as SSI or any other type of federal or state aid and meet the income requirements listed below. If not on public assistance, but meet the income requirements, you may also qualify by submitting a copy of the page of your current federal income tax return that lists your dependents and income. A federal or state assistance award letter will only be required if you are not submitting a tax return. Applicants must present a photo I.D. with their application.
2. Applicants must live in the city of Ontario and be able to show proof of residency by submitting a **current utility bill (cell/phone, cable/internet, water, gas) or a bank statement displaying an Ontario address**. Covid-19 Relief applicants must submit a letter or form showing proof of recent unemployment benefits, a reduction of employment hours and/or furlough orders.
3. Children who are at least 16 months of age and adults who have been directly affected by the impacts of the Covid-19 virus.
4. **VETERAN REQUIREMENTS:** VA Card, California driver license displaying the "VET" symbol, or a copy of DD214 form, issued by the San Bernardino County Veterans Affairs, along with qualifying documents listed on page 3.

5. **SENIOR REQUIREMENTS:** Must be 50 years or older and qualify under the income rules and guidelines as shown in items #1 and #2 above and must be able to provide the approved documents outlined on page 3.

**Original supporting documents are required and must be presented at the time of application submittal. Applications without original supporting documents will be deemed incomplete and will NOT be accepted.**

**San Bernardino County Guidelines:**

**Number of persons in household  
Please circle the number that applies to you**

Income must be at or below figures listed	1	2	3	4	5	6	7	8
	37,750	43,150	48,550	53,900	58,250	62,550	66,850	71,150

**Scholarship Amounts:**

1. One-hundred dollars in scholarship funds per **qualifying senior or veteran** participant and fifty dollars for Covid-19 applicants will be awarded per funding year. Classes or programs that exceed the awarded scholarship amount are eligible for registration; however, the remaining balance will be the sole responsibility of the scholarship recipient, parent or guardian to pay. As well as any supply fees or equipment charges.

2. The number of scholarships issued to the community will be based on available funds.

3. **INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED!** *Submitting an application does not constitute approval.*

**Scholarship Award Dates & Participation Rules:**

1) Failure to attend registered classes or programs without prior notification and approval may disqualify you from future scholarship awards. Notification must be made to the scholarship coordinator or Armstrong office staff within one week of the class or program start date. Scholarship refunds will not be given to high demand programs. This includes summer camps, senior excursions and aquatics.

2) If the program or class is canceled, the full amount will be refunded back to the recipient's scholarship account and may be used for another qualifying class.

3) **Applications will only be accepted at the Armstrong Community Center and the Ontario Senior Center.**

4) You may be disqualified from future C.E.S. funding if at least 90% of awarded scholarship funds are not utilized by March 31, 2021.



Please retain pages 1 and 2 for your records.

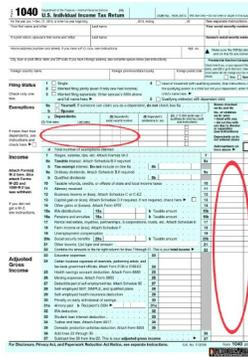
# ACCEPTED FINANCIAL AND IDENTIFICATION DOCUMENTS REQUIRED AT THE TIME OF APPLICATION SUBMITTAL

## REQUIRED BY ALL SENIOR AND VETERAN APPLICANTS:

A government issued picture ID (passport, driver license, etc.)



**Federal Income Tax Return**  
(we only need the page showing dependents and income)



If you cannot provide a federal income tax return, supporting documentation (1099R or SSA 1099) of financial aid or assistance may be used.

CORRECTED (if checked)		OMB No. 1545-0047
1 Recipient's name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	2 Recipient's phone no.	<b>2019</b> <b>Miscellaneous Income</b> <b>Copy II</b> <b>For Recipient</b>
3 Recipient's name	4 Recipient's address (including apt. no.)	
5 Recipient's city or town, state or province, country, and ZIP or foreign postal code	6 Recipient's account number (see instructions)	7 Other income 8 Other receiving process 9 Other receiving process 10 Other receiving process 11 Other receiving process 12 Other receiving process 13 Other receiving process 14 Other receiving process 15 Other receiving process 16 Other receiving process 17 Other receiving process 18 Other receiving process 19 Other receiving process 20 Other receiving process 21 Other receiving process 22 Other receiving process 23 Other receiving process 24 Other receiving process 25 Other receiving process 26 Other receiving process 27 Other receiving process 28 Other receiving process 29 Other receiving process 30 Other receiving process 31 Other receiving process 32 Other receiving process 33 Other receiving process 34 Other receiving process 35 Other receiving process 36 Other receiving process 37 Other receiving process 38 Other receiving process 39 Other receiving process 40 Other receiving process 41 Other receiving process 42 Other receiving process 43 Other receiving process 44 Other receiving process 45 Other receiving process 46 Other receiving process 47 Other receiving process 48 Other receiving process 49 Other receiving process 50 Other receiving process 51 Other receiving process 52 Other receiving process 53 Other receiving process 54 Other receiving process 55 Other receiving process 56 Other receiving process 57 Other receiving process 58 Other receiving process 59 Other receiving process 60 Other receiving process 61 Other receiving process 62 Other receiving process 63 Other receiving process 64 Other receiving process 65 Other receiving process 66 Other receiving process 67 Other receiving process 68 Other receiving process 69 Other receiving process 70 Other receiving process 71 Other receiving process 72 Other receiving process 73 Other receiving process 74 Other receiving process 75 Other receiving process 76 Other receiving process 77 Other receiving process 78 Other receiving process 79 Other receiving process 80 Other receiving process 81 Other receiving process 82 Other receiving process 83 Other receiving process 84 Other receiving process 85 Other receiving process 86 Other receiving process 87 Other receiving process 88 Other receiving process 89 Other receiving process 90 Other receiving process 91 Other receiving process 92 Other receiving process 93 Other receiving process 94 Other receiving process 95 Other receiving process 96 Other receiving process 97 Other receiving process 98 Other receiving process 99 Other receiving process 100 Other receiving process

2012			2011	
1 Recipient's name	2 Recipient's address (including apt. no.)	3 Recipient's city or town, state or province, country, and ZIP or foreign postal code	4 Recipient's phone no.	5 Recipient's account number (see instructions)
6 Recipient's name	7 Recipient's address (including apt. no.)	8 Recipient's city or town, state or province, country, and ZIP or foreign postal code	9 Recipient's phone no.	10 Recipient's account number (see instructions)
11 Recipient's name	12 Recipient's address (including apt. no.)	13 Recipient's city or town, state or province, country, and ZIP or foreign postal code	14 Recipient's phone no.	15 Recipient's account number (see instructions)
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96 Recipient's name	97 Recipient's address (including apt. no.)	98 Recipient's city or town, state or province, country, and ZIP or foreign postal code	99 Recipient's phone no.	100 Recipient's account number (see instructions)

Current utility bill or other document proving Ontario residency.

\*Note: Other supporting documents, not listed above, may be required to establish permanent, legal guardianship

**Covid-19 Relief Applicant Requirements:**

Current copy or recent unemployment benefits  
and/or

letter from employer stating you have had a reduction in employment hours,  
have been furloughed, or been laid off.

**IN ADDITION TO THE FINANCIAL DOCUMENTS REQUIRED BY ALL APPLICANTS, PLEASE SUBMIT ONE OF THE FOLLOWING SUPPORTING DOCUMENTS IF APPLYING UNDER VETERAN STATUS.**

**VETERANS:**

California Driver License with "VET" symbol displayed, along with qualifying income documents

OR:

DD214 FORM, with qualifying income documents

OR:

VA CARD, with qualifying income documents





OFFICE USE
Date/Time: _____
Staff Full Name: _____

# COMMUNITY EMPOWERMENT SCHOLARSHIP (C.E.S.) APPLICATION

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Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please list all family member(s) living in your household:

NAME	BIRTH DATE	PLEASE MARK SENIOR (S), VETERAN (V) OR COVID (CV)	SCHOLARSHIP RECIPIENT MARK (X)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

