



**KIAI**

K A R A T E  
I N S T R U C T I O N  
A S S I S T A N C E  
I N I T I A T I V E

## Scholarship Application Form

### Part 1

#### Applicant Information

Instructions: A letter explaining your interest in the martial arts must be submitted with application. Include in your letter the reasons why you believe you should be considered for a KIAI Scholarship.

Name \_\_\_\_\_ DOB \_\_\_\_\_ M \_\_\_ F \_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

### Part 2

#### Financial Limitation (required)

Instructions: To be completed by the head of the household. Verification of income must be submitted with application. The following documents are required: Most recent 1040 tax return, most recent month of pay stubs from each employed member of household, and copy of benefits determination letter (SSI, TDI, Welfare) if applicable.

Name \_\_\_\_\_ Relationship to applicant \_\_\_\_\_ Phone \_\_\_\_\_

Address (if different from applicant) \_\_\_\_\_

Number of people in household: adults \_\_\_\_\_ children \_\_\_\_\_ Total household family income \_\_\_\_\_  
(include all wages, public assistance, child support, alimony, TDI, unemployment, pension, retirement income).

Other information to indicate financial need:

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(over)

### **Part 3**

#### **Dojo Owner Referral (required)**

Instructions: To be completed by the owner of the selected karate studio. A letter of recommendation must be submitted with application. This letter should verify the applicant's initiative and interest in the martial arts.

Name \_\_\_\_\_ Karate Studio \_\_\_\_\_ Phone \_\_\_\_\_

#### **Dojo Certification**

KIAI scholarship funding will be given to an applicant that wishes to enroll in a karate studio/dojo that meets certain criteria. These criteria ensure that the student receives karate instruction in an experienced, safe, established and principled learning environment. Signed dojo certification form must be submitted with this application.

### **Part 4**

#### **Community Referral (optional)**

Instructions: To be completed by community member (example: teacher, social worker, police officer, involved adult) who believes this applicant would benefit from karate instruction. Please attach a letter of recommendation with application.

Name \_\_\_\_\_ Relationship to applicant \_\_\_\_\_ Phone \_\_\_\_\_

### **Part 5**

#### **Applicant Signature (required)**

I hereby certify that the information provided in this application is true, and there is no misrepresentation by omission. I understand that any scholarship awarded is dependent on certain terms and conditions, which have been provided to me, and may be withdrawn at any time.

Signature of applicant \_\_\_\_\_ date \_\_\_\_\_

Parent/guardian (if applicant is under 18) \_\_\_\_\_ date \_\_\_\_\_

