

Eric "Big E" Ream

Memorial Athletic Scholarship

Eric Ream was a talented athlete who participated in many athletic programs such as softball, volleyball, golf, basketball, snowshoeing, swimming, track, and bowling. He is remembered at FVSRA for his contagious smile, infectious laugh, and kindness to his peers and fellow athletes.

The purpose of The Eric Reams "Big E" scholarship is to award scholarship money to individuals with disabilities who may otherwise not be able to fully participate in FVSRFA athletic and therapeutic recreation programs due to financial restrictions. Participation in athletics provides holistic benefits that contribute to an individual's physical, mental, social, and emotional well-being; something to which everyone should have access.

Participant Information

Name:			D.O.B.:			
Address:			Phone:			
	Street address	Apt/Unit #	Email:			
	City State	Zip Code				
Guardia	nn Information					
Name:			Phone:			
Relation t			Email:			
Address:						
If different	Street Address	Apt/Unit #		State, Zip		
Please check at least one of the following selections that you currently receive or applies to you. You may be required to provide supporting documentation for your selections. If you don't receive any of these, additional documentation may be requested.						
	Reside in a CILA (Community Integrated Living Arrangement)					
	Social Security Income					
	Supplemental Nutrition Assistance Program (SNAP) through IL	Link				
	Illinois All Kids (CHIPRA)					
	YouthCare Health Plan, DCFS					



Program Information

and loss of scholarship eligibility.

Signature:

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Please list all that apply or attach a program registration.						
Program Name:	Program Number:					
Program Name:	Program Number:					
Program Name:	Program Number:					
Other Expenses Please list any other expenses that are associated with the program(s) in wh	nich you are requesting assistance:					
Additional Information						
Other information that you would like to share that may be relevant to the scholarship request:						
Disclaimer and Signature						

I acknowledge that all information provided in this application is accurate and truthful to the best of my knowledge. I understand that if this application results in an award of funds, any false or misleading information may lead to disqualification from FVSRA programs

Date: