To convert to a fillable form , click on "Open With Different Viewer" at top right and choose Adobe Acrobat. Once completed, click on the envelope on top toolbar and then email to: recservices@minnetonkamn.gov along with the required supporting documents.

Scholarship Application Form

Richard Wilson Scholarship Fund

HOPKINS-MINNETONKA RECREATION

The Richard "Dick" Wilson Scholarship Fund provides financial aid to Hopkins and Minnetonka residents participating in joint-recreation sponsored programs. Dick Wilson was the long-time Director of the Hopkins-Minnetonka Recreation Department and was instrumental in bringing the two cities together to form the joint recreation program that still stands today.

Clear Form

Scholarship eligibility and process:

- Available to Hopkins and Minnetonka residents only. *Proof of residency required.*
- Financial assistance provided to children ages 18 and younger.
- Applicants receive $100 per person annually, expiring at the end of the calendar year.
- Scholarships will be issued within five business days of application submission for eligible applicants.
- Scholarships are contingent upon scholarship fund balance.
- A completed scholarship application and one supporting financial document are required.
- Scholarships are not granted for facility memberships or rentals.
- Applications will remain confidential.
- Contact Recreation Services at 952-939-8203 with questions or for more information; submit application to recservices@minnetonkamn.gov or in-person@14600 Minnetonka Blvd.

Required documents (forms must be current):

- Proof of residency (i.e. current utility bill, lease or purchase agreement.) Driver's license does not qualify.
- Required supporting financial documentation includes: School Free or Reduced Lunch program letter, proof of county financial assistance (SNAP, Emergency or Medical Assistance).

Primary Adult:	
Address:	
Email:	
Phone:	

Household member(s) seeking financial assistance (must be 18 years and younger):

	First Name:	Last Name:	Birthdate (Mo/Day/Year):	Gender: **M F**	School Grade: (2025/2026)
Applicant 1:					
Applicant 2:					
Applicant 3:					
Applicant 4:					

To the best of my knowledge, all of the information provided on my application is accurate and complete.

☐ *Please check signature box at left to indicate your agreement.*

Signature Date

For Office Use:	Approved by: _____	Amount:	Date: