



Tuition Relief/Scholarship Application

Please complete one application for each child.

Name of Child _____ Date of Birth _____

Mother's First Name _____ Last Name _____

Father's First Name _____ Last Name _____

Home Address: Street _____ Apt # _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone Email _____

Address _____

Are you currently employed? Yes ___ No ___ Annual Household Income: \$ _____

Mother's Employer _____

Address _____ Employer's Phone Number _____

Father's Employer _____

Address _____ Employer's Phone Number _____

Days and hours your child attends the program _____

Current Tuition _____ Hourly, Daily, Weekly or Monthly _____

***If you have not filed a Federal Tax Return and do not have proof of income, please submit the following:**

- Letter from employer stating length of employment, days, hours and salary
- Letter from you indicating unemployment status

If you need help completing this application speak with the Director or Finance Manager.

Signature _____ Date _____

Signature _____ Date _____

For Official Use Only

Application sent by: _____

Completed application received: _____

Effective Date: _____

Program Contact Person: _____

Date Agreement Sent: _____

Date Agreement Received: _____

Tuition Scholarship Survey

Please complete the following questionnaire.

1. Is your child currently attending the program? Yes ___ No ___

2. Why does your child need this program?

3. How many children are in your family? _____

List their ages

4. How much tuition assistance or learning material cost do you need?

5. Please briefly describe your need for this scholarship:

6. Are you interested in helping the program as a volunteer? If yes, please write down your skills and interests.

Thank you for completing this application. Someone will be in touch with you shortly.