

# Student Assistance Application

Date \_\_\_\_\_ Season: Fall / Winter / Spring Activity \_\_\_\_\_

**ASSISTANCE** MAY ONLY BE REQUESTED FOR STUDENTS WHO ARE CURRENTLY PARTICIPATING IN AN ACTIVITY. FORMS SHOULD BE SUBMITTED AT REGISTRATION EACH SEASON.

## Student Information

Student Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Student Address \_\_\_\_\_

Grade \_\_\_\_\_ Female Male

## Parent/Guardian Information

Student Resides With: Parent Guardian Other \_\_\_\_\_ Name of Parent/Guardian/Other \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

**Applicant must meet a minimum of two of the seven criteria below.**

Please check all that apply...

**Applied for Free & Reduced Meal Program\***

No Parents

Other special circumstances...

**\*Will return approval to Finance Office**

Single Parent

Please describe: \_\_\_\_\_

Living with handicapped parent

Foster Home

Parent(s)/Guardian(s) on state assistance (WIC, food stamps)

**Signatures below verify the above information is accurate. All signatures are required for processing.**

\_\_\_\_\_  
Parent/Guardian Date

\_\_\_\_\_  
Student Date

\_\_\_\_\_  
Principal or designee Date

For Office Use Only		
School:		
\$200 → \$40	\$100 → \$20	Other:
\$150 → \$30	\$ 35 → \$ 7	

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