



TUITION ASSISTANCE APPLICATION

Child's Name _____

Parent(s) Name _____

Home Address _____

Name/relationship of person completing application _____

Phone Number of person completing application _____

Why do you need Tuition Assistance?(Please be specific and provide details)

How long will you need tuition assistance?

Have you applied for childcare assistance with Job & Family Services? When? Response?

Are there any other resources that might help pay your child's tuition?

How much can you pay each week?

I verify the above information is factual and I am requesting tuition assistance.

Signature _____ Date _____