

Scholarship Application

Applicant Information:

- Child's Name:
- Child's Age:
- Parent/Guardian Name:
- Parent Contact Information:
 - Phone:
 - Email:
- Address:
- Current School:

Financial Assistance Information:

- **Type of Assistance Needed:** Please select one
 - **Low-Income Family Assistance:** (e.g, qualify for social services like free or reduced lunch)
 - **Financial Hardship Assistance:** (e.g., currently facing temporary or unforeseen financial challenges).

For Low-Income Family Assistance Applicants:

- **Are you currently receiving any social services?** (e.g., Free or Reduced Lunch, SNAP, WIC)
 - Yes
 - No
- **Proof of Participation:** Attach a copy of your enrollment in the specified programs if available

For Financial Hardship Assistance Applicants:

Please provide a brief explanation of your current financial hardship (below) and include any relevant supporting documents if possible:

Additional Information (All Applicants):

- **Benefit of Scholarship:** How will this financial assistance impact your child's participation in NLLL?
- **Other Considerations:** Are there any other circumstances or details you would like the committee to consider?

Declaration:

I certify that the information provided is true and accurate to the best of my knowledge. I understand that this application will be treated with confidentiality and used solely for the purpose of determining eligibility for financial assistance.

Parent or Guardian's Full Name:

Email:

Phone #:

Return the form to: registrar@northlakell.org & treasurer@northlakell.org