



Hope School Foundation Grant Assistance Program

The Hope School Foundation's mission is to encourage and provide support for all of Hope's programs and services. In the spirit of this mission, the Hope School Foundation provides families with financial limitations an opportunity to seek grants for services at Hope. Under this grant program, any person or family receiving services who is uninsured, underinsured, or otherwise unable to pay for services at Hope may apply for assistance through the Foundation.

Please fill out the following application to the best of your ability.

Client Information

First Name _____

Last Name _____

Address _____

Phone _____

Email _____

Hope Services Utilized _____

Parent/Guardian Information

First Name _____

Last Name _____

Address _____

Phone _____

Email _____



Financial Information

Yearly Household
Income

Insurance (if applicable)

Insurance Copay and
Deductibles (if
applicable)

Please attach your prior year's tax return and/or your last two pay stubs to this document to verify your financial records.

Narrative

In a few sentences, please describe your child's need for Hope's services and why you are requesting assistance:

Certification

I acknowledge that I have read and agree to abide with the tenets of Hope's Foundation Family Grant Assistance Program Policy. I understand that the submission of this application does not guarantee funding. I also understand that approval of this application does not guarantee future funding. I must reapply annually.

Parent / Guardian Signature

Date