



FRIENDS OF FAMILIES
with children in crisis

FINANCIAL AID APPLICATION
(TO BE COMPLETED BY PARENT OR GUARDIANS)

Our child, _____, is a student at _____ (the "School"). He or she was admitted to the School _____ months ago and is targeted to graduate during _____ (month, year). In applying for financial assistance from the Foundation, we understand and agree and hereby request that the School furnish to the Foundation any information requested by the Foundation concerning our child and us that the Foundation deems necessary, including progress evaluations pertaining to our child, details of our financial resources, records of our attendance at parent workshops and seminars, etc. In addition, we agree to furnish such information to the Foundation directly upon request. We further understand and agree that, if we receive financial assistance directly or indirectly from the Foundation: (1) the Foundation will have the right, upon our child's graduation from the School, to publicly identify our family members by name, publicly disclose information about or child's success at the School and publicly state that the Foundation as provided financial assistance to us. Absent our further consent, however, the Foundation will not publicly reveal any specific information about our financial condition; and (2) we will notify the Foundation in the event we receive any financial assistance in connection to our child's education at the School from any source whatever, including an insurance company, a school district, any governmental agency, etc., and will repay our Foundation loan with the proceeds of such financial assistance.

Date

Name of financially responsible party

Signature of financially responsible party

Name of financially responsible party

Signature of financially responsible party