



**BOYS & GIRLS CLUB
OF FLAGSTAFF**

Date Received: _____

TUITION ASSISTANCE APPLICATION

A separate form must be completed for after school and summer programming. Submit to the program director with the required documentation.

HOUSEHOLD INFORMATION

Number of Children: _____

Child/Children's Name: _____

Parent/Guardian(s) Name: _____

Address: _____

Cell Phone: _____

Work Phone: _____

REQUIRED INCOME INFORMATION

***Must attach copies to application**

- Previous 3 months of pay stubs (both parents/guardians if applicable)
- Previous 3 months of bank statements
- Proof of government assistance (SNAP, WIC, Rental lease agreement, etc.)
- Other: \$ _____ (if applicable)

MONTHLY EXPENSES

- Rent/Mortgage payment \$ _____
- Utilities \$ _____
- Food Cost \$ _____
- Child Care \$ _____
- Other \$ _____

REASON FOR ASSISTANCE:

Applicant Signature: _____ Date: _____

OFFICE USE ONLY

- Denied
- Approved

Approved By: _____ Date: _____

Scholarship Amount: _____ % Daily Cost: \$ _____

Scholarship amount valid until _____

Referred by: _____

Fecha de Recepción: _____



**BOYS & GIRLS CLUB
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APLICACIÓN PARA ASISTENCIA CON LA MATRÍCULA

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INFORMACIÓN DE HOGAR

Número de Niño(s): _____

Nombre de Niño(s): _____

Nombre de Padres/Guardianes: _____

Dirección: _____

Número de Teléfono: _____ Número de Trabajo: _____

REQUIRED INCOME INFORMATION

***Must attach copies to application**

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