



Funding Application

Applicant Information

Full Name: Last First M.I. Date:

Address: Street Address Apartment/Unit #

City State ZIP Code

Phone: Email

Employment Goal

Is this request for a WNCC Course for credit YES NO Is this request for a WNCC Community Education Course? YES NO

Is this request for an alternative educational opportunity YES NO If yes to any, what courses?

Do you receive other funding for courses? YES NO

If yes, explain:

Funding Request

Total Uncovered Tuition Cost Course:

Book 1: Book 2: Can you use a LL book? YES NO Book Costs:

Materials Cost Total Cost Requested

90% Potential Foundation Share: 10% Student/Family Share:

Income Information

Please provide the following information:

Parent Guardian Names Monthly Income Your Monthly Income

Household Size (including work and SSI)

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I fully understand that the LL Foundation was put into place to fund opportunities for me to take courses with peers outside of LifeLink. I am applying for a course/class that is not exclusive to LifeLink students.

I understand that I am personally responsible to pay the costs not funded by the foundation. If I fail to pay my bill, then I am not eligible for further funding.

Parent
Signature: _____

Date: _____

Student
Signature _____

Date: _____