



## 2024-2025 Financial Assistance Program-Application and Income Certification Form

Please	Print	
NAME		
ADDRE	ESS	
CITY, S	STATE, ZIP	
	HONE NUMBER	
EMAIL		
	Y SIZE (this number should match your tax return):	
	1□ 2□ 3□ 4□ 5□ 6□ 7□ 8□	
FAMIL'	Y INCOME: My current family yearly income from all sources is: \$	
	Family income means the total income of all persons living in the same household who are related, marriage or adoption and are benefiting from the activities (this number should match your tax	t
	urately determine your household income, you must include the income of all persons residing in me from all sources.	
ſ	Approved Document for Income Verification	]
	You must provide a copy of your 2023 or 2024 Federal Tax Return for Income Verification	
given o	Financial assistance is based upon income verification and funding availability. Assistance will be n a first-come first-served basis until funds have been exhausted. All funds awarded must be use June 30, 2025.	
	<b>CANT STATEMENT:</b> I hereby certify that the information on this form is accurate and complete. I cand that this self-certification may be subject to further verification by the agency providing the s.	
Sign	ature: Date:	
	Office use only	
	Tax return year Annual income Verified by	

## **2024-2025** Financial Assistance Program Application and Income Certification Form

One application per family. Please complete the entire application. Incomplete applications will not be accepted.

Please only list individuals for whom you will use assistance.

1. Childs Name:				
	Last	First	Middle Initial	
Date of Birth:		Program interest:		
	Month/Day/Year			
2. Childs Name:				
	Last	First	Middle Initial	
Date of Birth:		Program interest:		
	Month/Day/Year			
3. Childs Name:				
	Last	First	Middle Initial	
Date of Birth:		Program interest:		
	Month/Day/Year			
4. Childs Name:				
	Last	First	Middle Initial	
Date of Birth:	Month/Day/Year	Program interest:		
	Month/Day/Year			
Please send appr	oval notification to:			
Parent/Guardian: _				
	Please print			
Phone:	any quantiana about your a	application, we will contact you	at this number	
ii we nave	any questions about your a	ipplication, we will contact you	at triis Huffiber	
Emaile				
Email:	nformation will be sent to thi	is email		