

# Samohi Grad Nite 2012

## Application for Financial Aid

**Complete this application, including the Teacher Recommendation and return to the Activities Office-Grad Nite Box no later than Friday, March 30, 2012.**

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Phone Number: Day: \_\_\_\_\_ Night: \_\_\_\_\_

How much of the ticket price of \$100 can you afford to pay? \$ \_\_\_\_\_

- I have qualified for the school's free/reduced lunch program.
- I have NOT qualified for the school's free/reduced lunch program but I need financial assistance because (please provide a brief explanation):
- I understand that I will be expected to perform community service.

\_\_\_\_\_  
Student Signature                      Parent/Guardian Signature                      Date

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### TEACHER RECOMMENDATION

Dear Teacher,

This student has applied for financial assistance to help pay for GRAD NITE. A teacher recommendation is needed for eligibility. If you feel that this student has demonstrated the attitude and initiative that makes them deserving of this aid, please sign below.

\_\_\_\_\_  
Teacher Name (Print)                      Teacher Signature                      Date

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Activities Office Use Only:			
Recommendation:			
_____ Free/Reduced Lunch Program	_____ Detentions	_____ Textbooks	_____ Library