

Brainpower Annual Tuition Award Application Form

THIS APPLICATION MUST BE FILLED OUT COMPLETELY IN ORDER TO BE ELIGIBLE TO APPLY FOR THESE FUNDS

Student's Name:				
Primary Parent/Guardian's Name:		Occupation:		
Secondary Parent/Guardian's Name:		Occupation:		
Home Address:	(Street address)	(City)	(State)	(Zip)
Home Phone:	I	Day Phone:	Other:	
Name of Employe	r			
Address				
Phone No				
Name of Supervisor		Phone	No	
Dept	Num	ber of Years Employed		
Current School At	tending:		_City:	
Current Student G	Grade (2nd Child):			
I understand that t tuition and fee pay	he award payment wi /ments. I also unders	ee payments to Il be made only if my c tand that if tuition and application will be denie	hild is enrolled, and I fee payments are not	
Parent or Guardian's Signature:			Date:	
Relationship to Stu	udent: Mother_	Father	Guardian	