



2011-2012 Scholarship Request Form
Edina Public Schools
Fax 952-848-3951 Ph 952-848-3980
www.edinacommunityed.org/familycenter

Fax to 952-848-3951 or mail to Edina Family Center 5701 Normandale Road, Edina, MN 55424

Child's name: Today's date

First Last

Date of birth: Age Boy Girl

Mother Phones: day eve. cell

Father Phones: day eve. cell

Child lives with: mother father both other

Address:

In order to receive financial assistance at the Edina Family Center you must be an Edina School District resident. There are no scholarships available for blocktime child care.

Please answer income questions below:

Father's name and occupation Monthly income

Mother's name and occupation Monthly income

Number of family members in household Adults Children

Children and their ages: Age Age

Other factors affecting family situation:

Do you have any concerns about your child's development? No Yes

Is so, please comment (social, emotional, health, physical, learning, etc.):

I certify that the above information is true and correct to the best of my knowledge.

Signature

Date

Section # Monthly Tuition Monthly Fee after assistance

Registration Fee Registration Fee after assistance

Office Use Only Below Dotted Line

Financial Arrangements:

Approved by: