

**FINANCIAL ASSISTANCE APPLICATION**

**2018 YMCA BLUE RIDGE LEADERS’ SCHOOL**

**ONLY TYPED FORMS WILL BE ACCEPTED – TYPE INTO FIELDS BELOW AND PRINT**

Financial assistance will be awarded to qualifying Leaders’ Division applicants based on need and available funds. Priority will be given to 1st and 2nd year enrollees. Maximum award will be $175 per person. For consideration this form must be fully completed including all four signatures. Reproduce this form as needed. **APPLICATION DEADLINE: April 1**. Use additional pages if necessary.

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| YMCA Name: | | | Club Advisor: | | | | | |
| Name of Applicant: | | | | Female Male | | | Age: | |
| Home Address: | | City: | | | | State: | | Zip: |
| Number of years in the Leaders’ Club program: | | This is the applicant’s  year at Blue Ridge Leaders’ School | | | | | | |
| Explain the need for the financial assistance: | | | | | | | | |
| Describe the efforts on behalf of the applicant to raise funds to attend the school: | | | | | | | | |
| How much has been raised? $ | | | | | | | | |
| Is the YMCA financially assisting the applicant to attend the School? Yes  No If yes please describe: | | | | | | | | |
| Amount provided by the YMCA? $ | | | | | | | | |
| Advisor statement supporting need: | | | | | | | | |
| In the applicant’s own words, why is it important to have the Leaders’ School experience? | | | | | | | | |
| Total annual family income (before taxes): $ | Total people in household: | | | | Number of children living at home: | | | |
| My Leaders’ School application is: Already In Attached with this application | | | | | | | | |

***NOTE: All four signatures are required to process this application.***

1. Applicant Signature Date:

2. Parent/Guardian Signature Date:

3. Club Advisor Signature Date:

4. YMCA Executive Director Signature Date:

Return by April 1 to: Brianne Pietronicco, Blue Ridge Leaders’ School, P.O. Box 989 Lake Villa, IL 60046