Application for Tuition, Scholarship, or a College Loan from Gwynedd Fiduciary Corp.

Administered by Care & Counsel

Submit to Clerk of Care & Counsel

1. Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_

 Member\_\_\_ Attender\_\_\_ Contact me by: email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or Phone\_\_\_\_\_\_\_\_\_

2. Briefly describe assistance sought. Use reverse for more details as needed.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 For: Myself \_\_\_\_ or, Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_

3. Date Assistance needed \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of program/Academic Yr. \_\_\_\_\_\_\_\_\_\_

 *Note: C&C meets first Monday of month. Please submit in time to be considered by committee*

4. Total cost of program \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount requested \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Precedent has been 50% of tuition*

5. Address for receipt of check: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**College Loan Addendum**

 I have completed and attached the Post-Secondary Interest-Free Osmun College Loan Fund Application (available from Clerk of Care & Counsel).

**Friends School Tuition Aid Addendum**

 I have completed the National Friends Education Fund Application from friendscouncil.org and submitted it to the Clerk of meeting on: Date\_\_\_\_\_\_\_\_\_\_\_

 *Precedent has been approximately $600/year*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For C&C Committee Use:

Approved\_\_\_ Not Approved\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8-21