

## Scholarship Application Form OUCARES Fall Programs 2017

OUCARES is offering limited scholarships for families in financial need to help pay tuition toward selected programs this spring. A scholarship committee will select the recipient(s) and the recipient(s) will be notified by email.

<u>PLEASE NOTE</u>: These scholarships are for financial assistance toward the total payment for each program.

Only <u>one</u> scholarship per participant with ASD: Please check which program the scholarship applies to:

Basic Social Skills (K-2<sup>nd</sup>, 3<sup>rd</sup>-5<sup>th</sup>)

## To apply for a scholarship:

- 1. Please submit a completed 2017 Fall Program Registration Form
- 2. Complete this Scholarship Application Form in its entirety
- 3. Return to OUCARES no later than September 29, 2017
- 4. OUCARES reserves the right to request further documentation and/or information to make final scholarship decision

make final scholarship decision  ***********************************				
Participant Name:			Date:	
Home Address:				
City:	State:	ZIP:	# of persons in household:	
Parent /Guardian Name:				
Phone:	Email Address:			
			why you are applying for this scholarship.	
<ul> <li>I understand there are lir</li> </ul>	ovided in this applic mited scholarships ation does not gua	available and tl rantee a schola	t and true to the best of my knowledge. he number of participants is limited. My urship or placement in OUCARES programs.  Date:	
olylieu			Date	

No later than <u>September 29, 2017</u> to:
Oakland University's Center for Autism Outreach Services (OUCARES)
Pawley Hall, Room 425C
456 Pioneer Drive
Rochester, MI 48309-4482
oucares@oakland.edu