

Scholarship Application Form OUCARES Winter Programs 2018

OUCARES is offering limited scholarships for families in financial need to help pay tuition toward selected programs this winter. 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 nd , 3 ^r	d-5 th) Robo	tics Club	Saturday Morning Basketball (6-12 yrs.)
Indoor Soccer (4-9 yrs.) Swimming (4-10 yrs. & 11-16 yrs.)			
 To apply for a scholarship: Please submit a completed 2018 Winter Program Registration Form Complete this Scholarship Application Form in its entirety Return to OUCARES no later than January 8th, 2018 OUCARES reserves the right to request further documentation and/or information to make final scholarship decision 			
			Date:
City:S	tate: ZIF	P:	# of persons in household:
Parent /Guardian Name:			
Phone:Email Address:			
Statement of Need: Please tell us in three sentences or less why you are applying for this scholarship.			
 By signing below I hereby represent: All information I have provided in this application is correct and true to the best of my knowledge. I understand there are limited scholarships available and the number of participants is limited. My completion of this application does not guarantee a scholarship or placement in OUCARES programs. 			
Signed:			Date:
No later than <i>January 8th</i> , 2018 to:			

No later than <u>January 8th, 2018</u> to:
Oakland University's Center for Autism Outreach Services (OUCARES)
Pawley Hall, Room 425C
456 Pioneer Drive
Rochester, MI 48309
oucares@oakland.edu