The Link School

Financial Aid Application						
Student's Name Parents' Names	First	Middle	Last/Surname	Preferred or Nickname	Jr./etc.	
Home Address	Mailing Address			City Country (if not USA)		
	State/Province		Zip/Postal Code			
			u are considering the costs well as Christmas and Sprii	of transportation for your studering Breaks.	nt back and	
In addition, please	be sure to consid	ler alternate fur	nding sources as possibilitie	es: extended family members, cl	hurch, etc.	
TUITION ASSIST	ΓANCE REQUES	<u>ST</u>				
The Link	h tuition assistance School can make Expenses (\$17,000)	e an initial awa	esting? rd of up to ½ of the total	\$		
grant requ students m	•	ed, if there are s	itial Tuition assistance still funds available, to a	\$		
Please briefly desc	cribe the basis of	your request fo	r assistance:			

Under certain circumstances, The Link School may request that you fill out additional documentation online as part of the Tuition Assistance Fund application process. We will inform you if there is a need for this.

Parent or legal guardian – please read and sign the following:

If my financial situation improves to the extent that I will no longer require all or part of a grand awarded, I agree to advise The Link School.

I understand that grants may be withdrawn if the student does not maintain satisfactory academic standing and constructive community citizenship.

I understand that the amount due to The Link School remaining after Tuition Assistance is awarded needs to be paid on a semester or monthly basis.

I declare that the information reported on this application is accurate and complete to the best of my knowledge.

Signature	Date
Relationship to the Student:	

Please Submit:

- This application form
- Complete and signed copy of your most recent Federal Tax Return including all submitted schedules.
- Copies of W-2s