

SAFE SITTER SCHOLARSHIP APPLICATION

Student Information:

(First) (Last)

(Age) (School)

Guardian Information:

(First) (Last)

(Address) (City, State, Zip)

(Phone) (Email)

Reason for scholarship request:

Student qualifies for free or reduced lunch at their school

Economic hardship due to parent job loss

Other (please describe): _____

*Application process may take up to three business days. At which time you will be notified via email or phone of your child's scholarship award amount. Please send scholarship application and student course registration by email to rachellehilliker@ywcaqlbr.org or mail to:

YWCA Great Lakes Bay Region
1104 Washington Ave.
Bay City MI, 48708