



Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Phone: Work: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**REQUEST FOR TUITION ASSISTANCE AND/OR PAYMENT PLAN**

The goal of Leadership Skagit, within the limits of available resources, is to provide partial tuition assistance to those candidates who are accepted into the program and demonstrate financial hardship that will prevent participation.

If granted, assistance will reduce the amount of the tuition. \$500 is the maximum amount considered. Payment plans are also available.

If you would like to be considered for tuition assistance and/or a payment plan, please complete this form and submit it with your application. Your request will have no bearing on your acceptance into the program. You may be asked to provide a more thorough overview of your financial situation.

**1. Community Sponsorship**

Are you affiliated with any employer or civic or community organizations that might contribute to your tuition?

\_\_\_\_\_yes \_\_\_\_\_no If yes, please list \_\_\_\_\_

**2. Tuition Assistance**

What amount of tuition assistance are you seeking?

\_\_\_\_\_ \$100 \_\_\_\_\_ \$300 \_\_\_\_\_ \$500

**Please explain in a few sentences why you are requesting tuition assistance:**

**3. I am interested in discussing a Payment Plan option. Please contact me.**

\_\_\_\_\_yes \_\_\_\_\_no