

Gardiner Middle School
 180 Ethel Street
 Oregon City, OR 97045
 (503) 785-8200
 (503) 650-5482 Fax

**Gardiner Middle School
 Athletic Financial Assistance
 Application Form**

General Participant Information

Today's Date:

Last Name	First Name
Grade: ___ 6 th ___ 7 th ___ 8 th	Requested for: ___ Dance Team ___ Track & Field ___ Wrestling ___ Other _____
Birth Date:	

Parent /Guardian Information

Mother/Guardian Name	Father/Guardian Name
Address	Address
City, State, Zip	City, State, Zip
Primary Phone	Primary Phone
Email	Email

Extenuating Circumstances

Please state any special circumstances that may qualify you for assistance.

___ This is the first time I have applied for financial assistance this year.

Financial assistance can be provided on an individual need basis, as funds are available. In some situations as student granted financial assistance may be asked to participate in school-based community service.

Parent/Guardian Signature

Official Use Only

- ___ Approved half (\$37.50) scholarship
- ___ Approved partial (\$25) scholarship
- ___ Approved full (\$75) scholarship

Administrator Approval Signature

Date:
