

Santa Rita School Scholarship Request Form

Student Name: _____

Grade Level: _____

Teacher Name: _____

To request financial assistance for a field trip, please complete the information below and return the form to your child's teacher. Please indicate the cost of the field trip, the amount you are able to contribute towards the cost and the scholarship amount you are requesting.

Date of Field Trip: _____

Location: _____

Cost of Field Trip: _____

Amount Contributed by Parent: _____

Scholarship Amount Requested: _____

Parent/Guardian Signature: _____ **Date:** _____

-----Office Use Only-----

Date Teacher Received Request: _____

Principal Approval: _____

Scholarship Approved in the Amount of: _____

Date Classroom Teacher/Parent Notified: _____

[Type text]