2024 UWM College for Kids NEED-BASED SCHOLARSHIP APPLICATION

Students who are entering K5-5th grades in the fall and are <u>eligible to qualify for free or reduced school lunch. Parents, please be</u> <u>advised that students who are not five years old by June 10, 2024, are not eligible for this scholarship.</u>

Additional Information. Please read and initial section below.

I understand that as funding is available scholarships will be awarded from January 3- May 25, 2025. I also understand that I will be notified of this award by email, and I have a specified timeline to accept this scholarship and pay the balance.

PLEASE FILL OUT THIS FORM COMPLETELY AND RETURN TO:

Scan and email to: cfkids@uwm.edu

Or Mail: UWM School of Continuing Education College for Kids & Teens 161 W. Wisconsin Ave., Suite 6000 Milwaukee, WI 53203

APPLICATION FORM

Please print legibly. Be sure to fill out all sections on this application or it will not be valid.

Student's Name:		Grade next Fall:
Student Birthday M/D/Y:	Parent/ Guardian Name:	
Parent/Guardian Primary email address:		
Address:		
City:	State:	Zip:
Parent/ Guardian Primary phone number:	Seco	ndary phone number:
Child's Race		
01 American Indian or Alaskan Native	02 Asian 03 Black or African Americ	an
04 Native Hawaiian or Other Pacific Islande	er 05 White 06 Two or more rac	ees
Child's Ethnicity		
01 Hispanic or Latino or Spanish Origin	02 Not Hispanic or Latino or Spanish Origin	
I wish to have my child considered for a College	for Kids Need-Based Scholarship.	
Parent/Guardian Signature:		Date:
**********	***********	***********
	FINANCIAL NEED FORM	
Please print legibly. Be so	ure to fill out all sections on this app	lication or it will not be valid.
	is eligible for t	ne reduced-fee meal program at our school.
(Student's name)		
(Principal's Signature)		Date
School	School Office Phone	

THIS FORM MAY BE DUPLICATED