



ROCEDUFUND

## Grant Request Form

Name:

Address:

Phone:

Email:

County of Residence:

Monroe  Wayne  Ontario  Livingston  Genesee  Orleans

Birth Date:

If under 21, Parent/Guardian Name:

Parent/Guardian Address – city, state & zip

Parent/Guardian Apt. #

Amount Requested

Date Needed

Describe what your financial need is and how this grant will help continue your education:

Did you graduate from High School?

Yes  or GDI/GED  N.A.

List any School Honors, Recognitions, Activities/Sports:

**Acceptance to College, School or Vocational Program**

1. Name of Degree, Program, Certificate  
or License

1. School or Institution Name

1. Enrollment Date

2. Name of Degree, Program, Certificate  
or License

2. School or Institution Name

2. Enrollment Date

**Enrollment**

Full Time     Part Time

**Please send your Acceptance letter or email to [info@rocedufund.org](mailto:info@rocedufund.org)**

**Work Experience – if applicable**

1. Company Name

1. Position

1. From (Mo/Yr)

1. To (Mo/Yr)

2. Company Name

2. Position

2. From (Mo/Yr)

2. To (Mo/Yr2

If you have done any volunteering in your community or at school, please describe.

What are your educational goals? How do you plan to use your education in the future?

## References

In order to be approved, please send two (2) Recommendation Letters.

You may use an instructor, a school counselor or employer.

Email the 2 letters to [info@rocedufund.org](mailto:info@rocedufund.org)

### 1. Name of School References

School

Position/Title

Phone Number

Email

### 2. Name of Character Reference (Not a family member)

Address

Position/Title

Phone

Additional information required:

1. You may be required to have an in-person, telephone or virtual interview.
2. You will be required to maintain contact with an assigned RocEduFund Mentor.
3. You will be required to provide verification at the end of the school term about your academic progress.

By entering your name and submitting this form you are promising that the information entered into this form is true.

Name

Date