**Words Alive Westreich Scholarship Program**

**Fund Request Form**

Words Alive requires the fund request form to be submitted via email (theresa@wordsalive.org), fax (858.274.9675) or mail (5111 Santa Fe Street, Ste 219, San Diego, CA 92109) by the **first Monday of the month**. It takes three days to process the fund requests.

**Recipient Name:**       **Amount requested**: **$**      **Date needed:**      /     /

**Reoccurring?** [ ]  Yes [ ]  No

**Description and purpose of request(s):**

Please check ALL that apply and provide amounts:

[ ]  Tuition ($     )

[ ]  Books ($     )

[ ]  School Supplies ($     )

[ ]  School Health Fee ($     )

[ ]  Bus Pass ($     )
[ ]  Laptop/Computer ($     )

[ ]  Laptop Bag/Carrier ($     )

[ ]  Flash Drive(s) ($     )

[ ]  Internet ($     )
[ ]  Printer ($     )

[ ]  Printer Paper ($     )

[ ]  Printer Ink ($     )

[ ]  Rent ($     )

[ ]  Gas/Electric ($     )

[ ]  Food/Groceries ($     )

[ ]  Toiletries ($     )

[ ]  Childcare ($     )

[ ] Other      ($     )

*Please note that the Westreich Scholarship does not cover cars, gas, car insurance, cell phones, cell service, clothes, or alcohol/drugs.*

          /     /

**Recipient Signature Date**

          /     /

**Mentor Signature Date**

*Mentor must sign off on all requests prior to submitting to the Words Alive office*

---------------------------------------------------------------------------------------------------------------------------------------

**For office use only:**

           /     /

**Executive Director Signature Date**

 **Description of support documentation received:**       **Date of funds transfer:**      /     /