



WWBA

HARDSHIP APPLICATION

Date: _____

Applicant (parent):

Child: _____

Name:
Address:
City/Zip:

Explanation: _____

Parent signature

(office use only)

I verify that this child meets criteria as a candidate for a hardship scholarship:

(Principal's signature)

(School)

Date presented to WWBA Board: _____

By: _____

Board Action: Approved

Not Approved