




R. TUCKER THOMPSON YOUTH DEVELOPMENT
 ★ CONFIDENCE LEADERSHIP TEAMWORK ★

CONFIDENTIAL: GRANT APPLICATION FORM

(to be completed by parent or legal guardian and referee)

Child's First Name:		Surname (whanau)	
Age:		Sex: M	F
This grant is being applied for by:		Relationship to child:	
Parent <input type="checkbox"/>	Legal Guardian <input type="checkbox"/>	Relationship other	
School:			
Postal Address			
Email:			
Home phone:		Mobile:	
Funding information (voyage cost is \$960)			<i>Shaded boxes total \$960</i>
Your contribution			\$
Other fundraising			\$
Total funds available			\$
How much financial assistance are you requesting?			\$ <i>(Must total \$960)</i>
ABOUT THE APPLICANT			
Please provide any information to support why you should receive a grant for a voyage			

REFEREE (E.G. TEACHER, COMMUNITY MEMBER, FRIEND BUT NOT A FAMILY MEMBER)

I recommend this person for a Youth Development voyage

Name and role: (please print)

Signed: Contact Phone: