



155 WYN Way • Boone, NC 28607  
(828) 264-5174 • Fax (828) 264-0838  
westernyouthnetwork.org

## Scholarship Application

If you need financial assistance to cover the costs of your student's participation in the WYN After School Program, please complete the following items. All information will remain confidential.

Student's Name: \_\_\_\_\_

Present School: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Parent Guardian Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

What do you feel is your financial hardship in paying the daily participation fee ?

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What amount do you think you could contribute (if any) monthly? \_\_\_\_\_

***If at any time you feel you are able to begin tuition payment, please contact***

***Angela Grimes, at 264-5174. Thank You!***