



FIRST RESPONDER SUPPORT NETWORK

WCPR Scholarship Application

Eligibility

Scholarships are based on financial need of self-paying attendees only. Full scholarships are not awarded.

FRSN is grateful for the opportunity to offer scholarship to those who need financial assistance, however those funds are limited. The scholarship policy is to offer assistance to those who are personally responsible for the cost. Those who are anticipating financial assistance from an outside source should not apply for a scholarship until that outside assistance has been approved. If outside assistance is being provided, please indicate how much that is and who will be providing it (Department, Union, Insurance, etc.).

I am receiving \$_____ in financial assistance from _____.

Instructions

Send this completed application to scholarships@frsn.org at least three weeks prior to your scheduled retreat. A determination will be made within two weeks of receipt of your application.

Intake Process

Your application will only be reviewed once you've started the intake process. If you haven't already, call 415-721-9789 and submit your scholarship application after the process has been started.

I have already called to start the intake process. YES: _____ (initial)

Applicant Information

Full Name: _____
First *Last*

Address: _____
Street Address

City *State* *ZIP Code*

Phone: _____ Email: _____

Financial Information

Current Employer: _____

Job Title: _____

Are you currently working? YES NO

If NO, please explain:

Monthly Household Income, Gross: \$ _____

Monthly Household Income, Net: \$ _____

Monthly Household Expenses: \$ _____

How many people depend on this income for support? _____

Briefly describe your need for financial assistance:

Signature

I certify that my answers are true and complete to the best of my knowledge. If a scholarship is awarded, I understand that false or misleading information in my application may result in revocation of scholarship aid. If a scholarship is awarded, I understand that I am responsible for payment of any remaining balance due for my attendance at WCPR.

Signature: _____ Date: _____