



# Homeschoolers of Maine

## Scholarship Application Form

PO Box 159, Camden, ME 04843

Phone: 207-763-2880 Email: homeschoolmaine@gmail.com

Please be sure all information entered is accurate. Incorrect information will delay your application.

Parent(s) Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Child(ren)s Name(s) and Age:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date you began homeschooling: \_\_\_\_\_

I certify that my child is not enrolled in a public, private or charter school, including but not limited to online charter schools and RAPPS. Yes \_\_\_\_\_ No \_\_\_\_\_

Scholarship: \_\_\_\_\_ Convention \_\_\_\_\_ Used Curriculum Sale \_\_\_\_\_ Portfolio Review

Amount Requested: \_\_\_\_\_

Briefly describe the current circumstances, which necessitate your request for assistance:

Please list two references that are not family members that will confirm your situation for us. Please fill out all information for all references and check the appropriate boxes.

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ friend \_\_\_\_\_ neighbor \_\_\_\_\_ pastor/church leader \_\_\_\_\_ other: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ friend \_\_\_\_\_ neighbor \_\_\_\_\_ pastor/church leader \_\_\_\_\_ other: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

For HOME Office Use Only: Date: \_\_\_\_\_ Scholarship \_\_\_\_\_ granted for \$ \_\_\_\_\_ OR \_\_\_\_\_ denied

Reason for Denial: \_\_\_\_\_