

Active First Responder & Military Verification Form

This program is open to all families who are employed by EMS, Police, Sheriff's Department, or active Military personnel. This program is for any Sacred Heart family, new or current. Program recipients are either the mother/father/legal guardian of the student and he/she must provide proof of employment/service attached to this form. Families will receive a \$1,000 discount of their child's tuition; the grant is renewable each year. If eligible, please fill out this form and return it to the admissions office.

Please contact Kara Oaks at koaks@sheartschool.com or Delaney Sullivan at dsullivan@sheartschool.com with any questions.

Student Name: _____ Grade: _____

Parent Name(s): _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

EMT

Firefighter

Police/Sheriff

Military

Employer Verification

I confirm that _____

is currently serving with the _____

(Name of organization)

Employers Signature: _____ Date: _____

Employers Name & Title: _____

Employer Contact Information: _____