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 (K-8) or \$500 (Pre-K); the grant is renewable each year.

If eligible, please fill out this form and return it to the admissions office.

Please contact Lane Abercrombie, Director of Advancement & Enrollment at labercrombie@sheartschool.com for more details.

| Student Name: Grade: | |
|--|---|
| Parent Name(s): | |
| Address: | |
| City/State/Zip: | |
| Phone: | |
| Email: | |
| EMT Firefighter Police/Sheriff Military | r |
| Employer Verification | |
| I confirm that | |
| is currently serving with the | |
| Employers Signature:Date: | |
| Employers Name & Title: Employer Contact Information: | |
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