

MTHEA Application For Curriculum Assistance

Application submitted by:

Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone: _____ E-mail: _____

Family to be considered:

Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone: _____ E-mail: _____

Tutorial or Support Group: _____

Umbrella School: _____ # of years homeschooled: _____

Family Status: married single parent family guardian grandparents

Head of Household's Employment (if applicable): _____

Names and Grades of Children in the home:

Name _____ Grade _____

Name _____ Grade _____

Name _____ Grade _____

Name _____ Grade _____

What amount of assistance do you feel this family needs?

\$25 \$50 \$75 \$100 Other _____

What are the curriculum needs of this family?

Why do you feel this family should be considered for financial assistance with their curriculum?

Thank you for your nomination. The MTHEA Curriculum/Scholarship Committee will pray and consider your nomination and contact you shortly. Blessings!

Mail application to: MTHEA CURRICULUM ASSISTANCE

P.O. BOX 2234

SMYRNA, TN 37167

Or email to: office@mthea.org