

**Foster Youth Education Fund  
Educational Grant Application**

**Contact Information:**

Student's Name \_\_\_\_\_  
Last name First name Middle initial

Address \_\_\_\_\_  
Street Apt

Mailing address (if different) \_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Street/P.O. Box Apt.

\_\_\_\_\_  
City State Zip Code

Telephone number (\_\_\_\_) \_\_\_\_\_

Date of Birth \_\_\_\_\_  
Month/ Day /Year

Secondary Contact \_\_\_\_\_  
Last name First name Middle initial

Address \_\_\_\_\_  
Street Apt

\_\_\_\_\_  
City State Zip Code

**Educational Information:**

School Name (currently attending) \_\_\_\_\_ Graduation  
date \_\_\_\_\_

Counselor's Name \_\_\_\_\_

Telephone Number (\_\_\_\_) \_\_\_\_\_

**Are you part of: (please circle answer)**

The Foster Youth Services Program? Yes No

The Foster Youth Initiative at a Community College? Yes No

A Guardian Scholars Program? Yes No

Cumulative Grade Point Average \_\_\_\_\_

\*\*\* Must include High School or College or Vocational Transcripts with application

College /University/Trade/Technical School

Planning to attend (if different from above) \_\_\_\_\_

Have you been accepted? \_\_\_\_\_

Course of Study \_\_\_\_\_

\*\*\*Must include acceptance letter or Proof of Enrollment with application

**Non- Relative References**

(1) Name \_\_\_\_\_  
Relationship \_\_\_\_\_  
Telephone Number (\_\_\_\_\_) \_\_\_\_\_  
How long have you known this person? \_\_\_\_\_

(2) Name \_\_\_\_\_  
Relationship \_\_\_\_\_  
Telephone Number (\_\_\_\_\_) \_\_\_\_\_  
How long have you known this person? \_\_\_\_\_

**Must include a Letter of Recommendation from each non-relative with application**

**Estimate of Need:** Please list an approximate amount of funding that would assist with costs for one full school year that will not be paid for by current personal savings, employment, other scholarships and student financial aid: \$ \_\_\_\_\_

**First Year Applicant?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Mentor:**

**Do you have interest in a mentor who would provide advice and support while you attend college or training? The mentor would be an adult that could assist you with questions regarding student living arrangements, courses, homework and other areas of your life as a college or vocational training student.**

Yes \_\_\_\_\_ No \_\_\_\_\_

*Eligibility for educational grant is without regard to race, gender, ethnicity, religion, sexual orientation or political affiliation.*

**To be eligible for our grants,**

**you must have been in foster care within the four county region of Sacramento, El Dorado, Yolo or Placer counties or currently reside in one of these four counties.**

We want to thank you for applying to the Foster Youth Educational fund grant program. We assure you that your application will be given the utmost consideration.

**ALL APPLICATIONS AND ACCOMPANYING  
DOCUMENTS MUST BE SUBMITTED  
By March 8, 2010 to:  
FOSTER YOUTH EDUCATION FUND  
c/o Sherry Griffith**

3323 Watt Ave. #253  
Sacramento, CA 95821

*Questions? Call Sherry Griffith at (916) 955-1699 or email at [sgriffith@acsa.org](mailto:sgriffith@acsa.org)*