

FINANCIAL ASSISTANCE: GRANTS FOR GIRLS

Mail or fax your completed financial assistance and registration forms one month prior to event to: Girl Scouts of Eastern Massachusetts, Financial Assistance Program, 265 Beaver Street, Waltham, MA 02452. Fax: (781) 893-0022. Questions: (781) 373-4232

Girl's Name: _____ Day phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Program Level: Daisy Brownie Junior Cadette Senior Ambassador

Troop/Group Number: _____ Service Unit: _____

Program or Event: _____ Date of Program: _____

Total fee of program \$ _____ will be divided as follows:

Girl and Family Contribution: \$ _____

Service Unit Contribution: \$ _____

Amount of Assistance Needed: \$ _____

Circle or check total household income before taxes, including salary, child support, and all other income:

2 people in household	3 people in household	4 people in household	5 people in household	6+ people in household
\$ 0 – 14,570	\$ 0 – 18,310	\$ 0 – 22,050	\$ 0 – 25,790	\$ 0 – 29,530
\$14,571 – 21,855	\$18,311 – 27,465	\$22,051 – 33,075	\$ 25,791 – 38,685	\$ 29,531 – 44,295
\$21,856 – 29,140	\$27,466 – 36,620	\$33,076 – 44,100	\$ 38,686 – 51,580	\$ 44,296 – 59,060
\$29,141 – 36,425	\$36,621 – 45,775	\$44,101 – 55,125	\$ 51,581 – 64,475	\$ 59,060 – 73,825
\$36,426 – 43,710	\$45,776 – 54,930	\$55,126 – 66,150	\$ 64,476 – 77,370	\$ 73,825 – 88,590
\$43,711 – 50,995	\$54,931 – 64,085	\$66,151 – 77,175	\$ 77,371 – 90,265	\$ 88,591 – 103,355
\$50,996 – 58,280	\$64,086 – 73,240	\$77,176 – 88,200	\$ 90,266 – 103,160	\$103,356 – 118,120
\$58,281 – 65,565	\$73,241 – 82,395	\$88,201 – 99,225	\$103,161 – 116,055	\$118,121 – 132,885

Number of people supported by this income: _____ Dependent Children _____ Dependent Adults

Parent/Guardian Name: _____ Day phone: _____

Number of people in household: _____ Adults _____ Children

Girl lives with (check one): _____ One Parent/Guardian _____ Both Parents _____ Other

Please describe any unusual family circumstances that you would like considered. Attach an additional page if necessary.

I certify that the information above is complete and accurate. I understand it is the only information the committee will have when considering this application. All information will be kept confidential.

Parent/Guardian Signature: _____ Date: _____