

## **Legacy Scholarship Application**

## **Eligibility:**

Parents/guardians who have utilized Legacy Pregnancy Center's services may apply for the award to offset the cost of tuition for their child(ren) to attend First Light Early Education Program.

Awards will be determined annually. Previous recipients must reapply each year they would like to be considered for an award. Funds will be paid directly to First Light at the beginning of each semester to offset tuition expenses. Parent/guardian is responsible for remainder of tuition and fees in accordance with center policies.

Scholarships are available for summer, fall, and spring semesters.

| Name:  |   |
|--|---|
| Address:   |   |
| City, State, ZIP   |   |
| Home Phone:  |   |
| Cell Phone:  |   |
| Email Address:   |   |
| Name(s) of Child(ren):   |   |
| Ages(s) of Child(ren):   |   |
| Date Range of Legacy Services:   |   |
| Program(s), days of the week and (visit <u>www.firstlightsheridan.com</u> fo | times child(ren) will attend First Light Early Education Program or program options): |

Return completed two-page application via mail, fax or email:

Legacy Pregnancy Center ATTN: Maureen Metcalf PO Box 252 847 Coffeen Ave Sheridan, WY 82801

maureen@legacypregnancy.org Fax: 307-673-4901



Please type answers to the following questions (may attach a separate page, if necessary). Limit each answer to 200 words or less.

| 1. | How has Legacy Pregnancy Center impacted your life?  |
|----|--|
| 2. | What do you personally plan to accomplish while your child attends First Light Early Education Program?  |
| 3. | As a parent, what do you feel is most important for you to instill in your child(ren) before they reach Kindergarten? How will a First Light education help you accomplish this? |
| 4. | What are your personal goals over the next five years?   |