

Scholarship Verification Form



▼ Parent/Guardian's Permission	
I hereby grant permission to New Hanover County Public Schools (NHCS) to verify with Education Without Walls the student below receives either free or reduced lunch from the New Hanover County School System or has been approved for McKinney Vento scholarship funds.	
Student	
First Name:	Last Name:
Parent or Guardian	
First Name:	Last Name:
Signature:	Date:

Please Do Not Fill Out Below This Line

— FOR OFFICE USE ONLY—

The parent/guardian of the student listed above has submitted an application to our agency to participate in our programming. The application indicates that this student either receives free or reduced lunch or receives support from the McKinney Vento act. Because our agency is a recipient of grant funds, we must verify status with your office. Our agency's acceptance or rejection of the application is not based upon your response to this request.

▼ Please check one of the boxes below to indicate the student's status:	
Yes , the student mentioned above receives free or reduced lunch. This status will expire on:	
Yes , the student mentioned above receives support from the McKinney Vento Act (MV).	
No , the student mentioned above does not receive free or reduced lunch nor is the student affiliated with MV.	
Schools representative	
First Name:	Last Name:
Signature of Respondent:	Date: