

## Titus Single Parent Mentoring Financial Aid Request Form

1. To receive financial aid for an upcoming TSPM event your application must be submitted and approved no later than 1 week prior to the event
2. Upon completing this form, print, sign, mail to Titus Single Parent Mentoring, 4350 Carfax Ave., Lakewood, CA 90713

<b>Today's Date:</b> /    /		<b>Event Date:</b> /    /	
<b>First Name</b>			
<b>Last Name</b>			
<b>Address</b>			
<b>City</b>			
<b>State &amp; Zip Code</b>			
<b>DOB</b> /    /	<b>Gender</b> M <input type="checkbox"/> F <input type="checkbox"/>		
<b>Child's Name (Age)</b>			
<b>Child's Name (Age)</b>			
<b>Child's Name (Age)</b>			
<b>Child's Name (Age)</b>			
<b>Child's Name (Age)</b>			
<b>Annual income</b>			
<b>Type of income</b>	AFDC <input type="checkbox"/> Child Support <input type="checkbox"/> Employment <input type="checkbox"/> <input type="checkbox"/> Unemployment Social Security <input type="checkbox"/> General Relief <input type="checkbox"/> <input type="checkbox"/> Other Attached copy of proof		
<b>What amount can you afford to pay?</b>			
<b>Do you have a need for food or clothing for you or your children?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>Print your name:</b> _____	Under the penalty of perjury, I indicate with my printed name and signature that the above is true and correct. Sign your name _____ Date:    /    /		
<b>For TSPM Office Use Only</b>			
<b>Identification provided:</b>		<b>Type:</b> Driver's License <input type="checkbox"/> Other: _____	
<b>Approved</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Amount</b> <input type="checkbox"/>	
<b>Explanation/comments:</b>   			
<b>TSPM approval from</b>			
<b>Date Received</b> /    /			
<b>Date approved/denied</b> /    /			