



North East Independent School District

Family Support Services • 3736 Perrin Central, Bldg. 1 • San Antonio, Texas 78217

McKinney Program
Ofc. (210) 407-0750
Fax (210) 653-1160

McKINNEY PROJECT TUITION ASSISTANCE REQUEST

_____	_____	_____	_____	_____
LAST NAME	FIRST NAME	GRADE	ID #	SCHOOL

ELIGIBILITY GUIDELINES:

1. Enrolled in the McKinney Program
2. Permission from School Counselor

I understand that in order to receive tuition assistance from the McKinney Program, I must maintain regular daily attendance and be progressing satisfactorily in my school classes. I further understand that if I withdraw or am withdrawn or fail this course, I will pay back the cost of the class.

_____	_____
STUDENT'S SIGNATURE	DATE

_____	_____
PARENT'S SIGNATURE	DATE

PRESENT COURSE SCHEDULE:			
COURSE(S)	GRADE(S)	ABSENCES	TEACHER
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TUITION ASSISTANCE REQUESTED FOR THE FOLLOWING:

_____	_____	_____	_____
COURSES	LOCATION	SESSION	COST

If attending Summer School please

Include: Course, course # (A.M. or P.M.)

_____	_____
COUNSELOR'S SIGNATURE	DATE

<u>FOR OFFICE USE TUITION ASSISTANCE IS:</u>		
_____ APPROVED FOR:	_____ CREDIT BY EXAM	_____ EVENING HIGH SCHOOL
	_____ SUMMER SCHOOL	_____ CORRESPONDENCE
_____ DISAPPROVED FOR THE FOLLOWING REASON		
_____ Signature of McKinney Program Director	_____ DATE	