

LEADERSHIP BREVARD

CLASS OF 2021

CONFIDENTIAL FINANCIAL ASSISTANCE REQUEST FORM

Thanks to our donors and alumni sponsors, LEAD Brevard has a limited pool of funds available to support financial assistance requests for participation in Leadership Brevard. Any financial awards made are based on a statement of need, funds available and must be requested at the time of the application. LEAD Brevard offers **only partial** (\$750 - \$1,000) financial assistance and only to those individuals who **clearly** cannot otherwise afford the 2021 program tuition of \$3,300. Entrepreneurs, small businesses (less than 5 employees), public sector and nonprofit organization staff are priorities for financial assistance.

To ensure that we make equitable and informed decisions about financial assistance, please complete the attached form and return by Tuesday, June 30, 2020 using one of the following methods:

1. **SCAN/EMAIL:** Candice Barton at Candice@LEADBrevard.org
2. **USPS MAIL:** LEAD Brevard, 123 Barton Blvd. Suite 101, Rockledge, FL 32955
Attn: Candice Barton

You will be contacted in July 2020 informing you of any financial assistance award.

LEAD Brevard's financial assistance funds are limited, so it is important to make sure they are wisely allocated. As a result, we ask a number of questions during the application process.

A community leadership task force of LEAD Brevard alumni reviews any financial assistance requests and determines how much LEAD Brevard can assist, if at all.

Confidential Form

Leadership Brevard Financial Assistance Request Form

The information you provide below will help to accurately assess your financial need and to consider an allocation based on both need and available resources. To be considered for financial assistance, please answer all questions.

All information you provide remains confidential. As a part of this application for financial assistance, you must include the dollar amount your employer (as applicable) is prepared to invest in your leadership development; please reference question 2.

Name: _____

Title/Organization: _____

Primary Phone: _____ Email: _____

1. Family income

\$25,000 or under	\$40,001-\$55,000	\$70,001-\$85,000
\$25,001-\$40,000	\$55,001-\$70,000	\$85,001 and over

2. Employer support

What is the dollar amount of support from your employer for your Leadership Brevard tuition?

Amount of Employer Support \$ _____

3. Other support

Will you be able to seek partial tuition support from other companies/organizations and/or civic leaders in the local area?

Yes No Amount of Other Support \$ _____

4. Amount of Assistance Sought (this question MUST be answered)

Class of 2021 Tuition \$3,300

Requested Financial assistance (up to a maximum \$1,000) \$ _____

Employer contribution: \$ _____

Other Support: \$ _____

How much will you personally contribute? \$ _____

5. Family

Number of dependents and ages: _____

6. Are you employed by a non-profit organization? Yes No

7. If your answer to # 6 is "yes," then please select one of the following:

Small (budget less than \$250,000)

Medium (budget between \$250,000-\$750,000)

Large (budget of more than \$750,000)

8. If financial assistance is not available, will you be able to participate in Leadership Brevard?

Yes

No

9. An extended payment plan schedule may be available; with a credit card on file, charged monthly with an agreed upon amount - Will you be requesting this option?

Yes

No

10. Describe any special circumstances that should be considered in your request for financial assistance (use one additional sheet of paper if necessary).

Signature: _____ Date: _____