

Name of Student \_\_\_\_\_

Address of Student \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone \_\_\_\_\_

email \_\_\_\_\_

Annual Household Pretax Income Less Than \$60,000     Yes     No

Name of Person Making Request (if different from above) \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ email \_\_\_\_\_

Amount of Request \$ \_\_\_\_\_

Entity To Receive Funds On Student's Behalf: \_\_\_\_\_

*(The Savage Foundation does not disburse funds directly to the recipient, but to the person, company, or agency providing the service benefiting the recipient)*

Reason For Request:

I, the undersigned, attest to the best of my knowledge that the information provided is truthful and accurate and understand that supplying false information can result in the rejection of the application.

\_\_\_\_\_ Date \_\_\_\_\_

Please feel free to attach any additional pages or information that you feel would aid us in evaluating the request. All requests **MUST HAVE** a third party letter from a teacher, coach, or counselor in support of the request.

<p><b>Mail To:</b></p> <p><b>The Savage Foundation</b> <b>421 E. Franklin St. Ste. 300</b> <b>Richmond, VA 23219</b></p> <p><b>ATTN: Requests</b></p>
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