2023-24

STUDENT EMERGENCY FUND Request Form

PRINCE ED WARD NOTE -m **Attention: Vicky Struthers or Kellie Brace** E-mail: vstruthers@hpedsb.on.ca or kbrace@hpedsb.on.ca

| School: | | Principal: | | |
|---|--------------------|------------------------|------------------------------|--------------|
| Date: | | Office Contact: | | |
| This is an urgent situation : Yes No | | | | |
| Food | Medical needs | | Eyeglasses | |
| Clothing | Transportation | | Other (please specify below) | |
| Inclusive Opportunity request for: Course related enhancements Other (please specify): Post-Secondary Application fee | | | | |
| Other sources of funds have bee | | Yes | No | |
| *If long term support may be necessary, please visit www.211.ca | | | | |
| Nature of Request: (Please do | not list student's | full name. For referen | icing, use initia | is or grade) |
| Amount Requested: \$ | | Requested by: | • | |
| (\$250 max. per student) | | | | |
| Principal's Signature: | | | | |
| (*Required) | | | | |
| This form is to be emailed to the attention of Vicky Struthers or Kellie Brace. | | | | |