



Easterseals of Southeastern Pennsylvania 2020-2021 Scholarship Notification and Agreement

Record Number: _____

Child Information

Name: _____

DOB: _____

Parent/Caregiver Information

Name: _____

Address: _____

Phone Number: _____

Pre-Kindergarten Scholarship Information

PKTC Program: Easterseals of Southeastern PA

_____ Bucks County Division, 2901 Edgely Road, Levittown, PA 19057

_____ Montgomery County Division, 1161 Forty Foot Road, Kulpsville, PA 19443

_____ Delaware County Division, 468 N. Middletown Road, Media, PA 19063

_____ Delaware County Division, Marple Site, 85 N. Malin Rd, Broomall, PA

Total Scholarship Award to be _____ in equal monthly installments of _____ per month.

This agreement indicates the amount to be awarded in scholarship support towards the full financial agreement package for the requested enrollment in Easterseals pre-kindergarten educational program.

The scholarship award and notification agreement is effective from _____ to _____ unless the parent/caretaker withdraws the child prior to the end of the enrollment period. The scholarship award is non-transferable to another child or to another pre-kindergarten/preschool program.

Parent/Caretaker Signature

Parent/Caretaker Signature

Date

Easterseals of SEPA Representative

Date