WTS Transportation YOU High School Scholarship

1. I am aware that my student is applying for the WTS Transportation YOU High School Scholarship.

Yes

No

1. I confirm that I am the Parent and/or Legal Guardian of the student applying for this scholarship.

Yes

No

Parent/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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