





DESCRIBE ANY FINANCIAL PROBLEMS OR EXTENUATING CIRCUMSTANCES  
REGARDING YOUR HOUSEHOLD:

LIST ALL INDIVIDUALS LIVING IN YOUR HOUSEHOLD AND THEIR RELATIONSHIP TO YOU:

I CERTIFY THAT THE ABOVE INFORMATION IS A TRUE AND ACCURATE STATEMENT OF  
MY FINANCIAL STATUS.

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SIGNATURE

DATE

This grant is based on financial need. Tell us what financial challenges you face as you return to school.

What is/are your educational goal/goals?

What is your date of completion? Must be within 24 consecutive months.

What made you decide to return to school at this time?

Please feel free to use the back of this page to further explain the answers to any of the above. We will be writing your recommendation to P.E.O. International should you be selected for consideration by our committee. Feel free to share experiences or plans that you believe will help us help you.