

Creative Wealth Intl's Goal: *To provide financial assistance for every child, teen and adult that wants or needs to attend a program but cannot pay for it on their own.*

Please provide the below information as accurately as possible so that we may determine your financial need fairly and honestly. If you only need a partial scholarship, please indicate the amount needed to join us and learn what it takes to become financially free. You are making a great investment in your child's future and we want to make every effort to help you do that.

Dates of the program you applying for: _____

Location of the program you applying for: _____

(All of the below information will be kept confidential)

Name	Phone Number	
Child's Name (1)	Child's Name (2)	
Address		
City	State	Zip
Email Address		

INCOME- All numbers are on a monthly basis:

1) Salary/income from job	\$ _____
2) Other income	\$ _____
TOTAL INCOME	\$ _____

EXPENSES - All numbers are on a monthly basis:

1) Rent/house payment	\$ _____
2) Car expenses	\$ _____
3) Household expenses (food, etc.)	\$ _____
4) Utilities	\$ _____
5) Medical	\$ _____
6) Other	\$ _____
TOTAL EXPENSES	\$ _____

Scholarship needs: **FULL** **PARTIAL:** We can afford to pay \$ _____ to attend the requested program.

Please state, in a couple short paragraphs, why you think it's important for you or your child(ren) to attend a Creative Wealth program:
