



BraveHearts

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VETERAN TRANSPORTATION ASSISTANCE SCHOLARSHIP APPLICATION

(APPLICATION MUST BE COMPLETED TO ITS ENTIRETY – INCOMPLETE APPLICATIONS ARE SUBJECT TO DISQUALIFICATION)

BraveHearts is committed to providing services to veterans and will assist individuals who are in financial hardship or unable to travel independently, to the best of our ability. BraveHearts Program Committee will review your application for transportation assistance, time permitting. This form will assist the committee in making an informed decision. Any missing information will delay the process or prevent scholarship from being awarded.

The completed scholarship application must be submitted each session block to meggan@braveheartsridding.org by the due date listed on the bottom of the form. **Please carefully evaluate your financial situation for each session that the scholarship is requested.** Full or partial scholarships may be granted based upon need and reasons listed in request. Scholarships will be granted only as funds are available – all funding for scholarships are at will of faithful donors. **Each scholarship recipient is encouraged to volunteer their time or find a way to give back to BraveHearts.**

Decisions based in part on the following criteria: attendance/promptness to scheduled sessions, financial need, diagnosis review and associated benefits, travel accommodations required.

Personal Info

Name (First, Last) _____ Date _____

Branch of Service _____

Years of Service _____ Phone number _____

Email Address _____

Home Address _____
(Street, City, State, Zip)

Financial Input/Questionnaire

WEEKLY Gross Income _____ Additional Financial Assistance Amount _____

List any fixed weekly expenses _____

Do you currently participate in services at BraveHearts? If yes, how frequently? _____

If you are traveling more than 35 miles to BraveHearts, is there a center located closer to you. If so, is there a reason you are not participating there? _____

What type of assistance are you looking for? (circle one) _____ Vehicle Fuel OR Airfare

Is transportation for an accompanying family member also requested? _____

Please explain why you are applying for scholarship assistance. This will help the committee make their decisions, so please include any details you are comfortable sharing. If necessary, you may attach another page to this form.