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The OurFamilyWizard® Website
Scholarship Request Form

Fax, email, or mail completed forms and documentation to:
Fax: (952) 548-8159
Email: info@ourfamilywizard.com
OFW® Scholarship Services
1302 NE 2nd Street, Suite 200
Minneapolis, MN 55413

STEP 1: The following information is required for BOTH parents:

Scholarship Parent:
First Name _____ Last Name _____
Street Address _____
City _____ State _____ Zip _____ Country _____
Phone (____)_____ Email _____

Other Parent
First Name _____ Last Name _____
Street Address _____
City _____ State _____ Zip _____ Country _____
Phone (____)_____ Email _____

STEP 2: One of the following documents MUST be included (check one):
ONLY applications with proper documentation will be submitted for consideration.

☐ **In forma pauperis**, or **proof of indigence** signed by the court within last 12 months
☐ **Signed letterhead** from a professional you are working with stating scholarship need
☐ **Government aid statement/award letter** (housing, medical, food, utility assistance etc.)
Benefits must be current and court documents must be within the calendar year

STEP 3: The following information is to be completed by the professional submitting on behalf of parent(s):

First Name _____ Last Name _____
Organization _____ Title _____
Street Address _____
City _____ State _____ Zip _____ Country _____
Phone (____)_____ Email _____

For professionals submitting for the parent(s), please choose one of the following AND complete parent information above:

☐ I am a court officer or arm of the court requesting a complimentary one year OFW® subscription for _____ due to financial need.
****Include documentation of need (as seen above) or signed letterhead stating need****

☐ I am a legal professional or court officer providing legal services free of charge due to financial need. Please grant my client a complimentary one year OFW® subscription.
****Include signed letterhead stating scholarship need****

☐ My services are provided at _____ % of my standard rate due to financial need. Please grant my client a one year OFW® subscription at the same percentage of the standard $99 annual subscription fee.
****Include signed letterhead stating scholarship need****

Signature _____ **Date**_____
(Court officers sign and date here when submitting unsigned documents)

Once we receive the application **and** documentation it can take up to five business days to receive a decision. Subscribers will receive an email notification and non-subscribers will receive a welcome email upon approval.