

Print Clearly

The OurFamilyWizard® Website
Scholarship Request Form

Print Clearly

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.

<input type="checkbox"/> In forma pauperis , or proof of indigence signed by the court within last 12 months <input type="checkbox"/> Signed letterhead from a professional you are working with stating scholarship need <input type="checkbox"/> Government aid statement/award letter (housing, medical, food, utility assistance etc.) *Benefits must be current and court documents must be within the calendar year*
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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:	
<input type="checkbox"/> I am a court officer or arm of the court requesting a complimentary one year OFW® subscription for _____ due to financial need. <i>*Include documentation of need (as seen above) or signed letterhead stating need*</i>	
<input type="checkbox"/> 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. <i>*Include signed letterhead stating scholarship need*</i>	
<input type="checkbox"/> 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. <i>*Include signed letterhead stating scholarship need*</i>	
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.