



Survivor Scholarship Renewal Application



FFLI Survivor Scholarship Renewal Application

If you have received financial support from Free for Life International in a previous academic term, complete this application to apply for continued support. Previous selection for a scholarship does not guarantee continued support. Please note that renewal applications do not require a new letter of support unless your previous letter writer is no longer available as a reference. Applicants should expect FFLI staff to have a follow-up call with the letter writer from the original application unless given other information by the applicant for a new reference.

Applicant Contact Information	
Full name:	
Date of birth:	
City of birth:	
Current home address:	
Email address:	
Phone number:	
Date of application:	

Academic Plans	Response
Where do you plan to study (include full name and address of the institution)? Please note if this has changed from your previous institution.	
What courses will you be taking in the term for which you are requesting funding?	
For which semester or academic term are you requesting funding? Please limit your request to one academic term per application.	
Did you pass all courses in the previous term in which you received FFLI funding?	

Budget/Finances	Response
Total request amount (please list in US dollars <i>and</i> local currency (ex: MXN, etc.)):	
Do you have any other sources of funding? If yes, please elaborate.	



Total cost of program tuition and fees of semester (or relevant timeframe):	
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By submitting this application, I affirm that I am a survivor of human trafficking. I affirm that I plan to attend and graduate from the academic program listed in the application. I understand that any false or misleading information in my application will lead to the forfeiture of any scholarship award. I understand that incomplete applications will not be considered. I understand that FFLI does not discriminate in scholarship decisions based on age, gender, religion, sexual orientation, or political affiliation. I understand that, if selected to receive a scholarship, I must submit progress reports to FFLI. I understand that FFLI may verify information or request additional information before making a scholarship decision. I understand that I am solely responsible for any tax obligations that I incur as a result of receiving a scholarship.

X _____
Applicant's signature

Date: ____/____/____



Budget Form for Scholarship Application

Name of Applicant:		
Date of Application Submission:		
Item:	Total Cost:	Amount requested from FFLI:
1. Tuition		
2. Transportation		
3. Housing/food		
4. School fees (specify which fees)		
5. Books/school supplies		
6. Other (specify)		
7. Other (specify)		
8. Other (specify)		
9. Other (specify)		
10. Other (specify)		
Total request in US\$:		

Note: Applicants may apply for funding for tuition, school supplies, school fees, testing supplies, housing and/or food and/or transportation to be used during an academic period, and/or educational equipment. If an applicant would like to apply for funding that does not fit into one of those categories, please contact a FFLI staff member to discuss before applying. Applicants who are awarded scholarships will be expected to turn in copies of receipts to FFLI for any item over \$50.00 if FFLI cannot pay directly to the institution. The amounts listed on this worksheet should reflect a single academic term (for example, list the cost of tuition for one semester, not an entire academic year).