Please Make The Village of Middlefield aware that you are applying for this funding.

Request for Funding
Pay to Participate / Summer Camp / Enrichment Activity/ Field Trips

Please complete this form, attach all required documentation, and return in the enclosed envelope. Failure to complete all sections and provide required verifications could jeopardize your participation in the program.

*****Applications MUST be received prior to the start of the activity. ****

Child's Name: _____ **Age:** _____ **Grade entering:** _____

Parent's Name: _____ **Date:** _____

Address: _____ **Phone:** _____

City: _____**Zip:** _____ **Number of household members:** _____

E-mail Address: _____ **Rent/Mortgage amount:** _____

Activity request: _____(Include documentation of activity including cost)

Cost of Activity: _____ **Date(s) of Activity**: _____

Total Net Monthly Income: _____ (**Verification MUST be provided**)

Source (circle all that apply): **Employment** **Unemployment** **Child Support**

Social Security **Retirement** **Disability** **Other**

Do you receive public assistance? (circle one) **Yes** **No**

If "Yes", what assistance do you receive? _____

Case Workers Name: _____

****Please attach to this application a brief description why you are requesting financial assistance through this program. This is required to be considered for funding.**

Please return all information to:

Sara Shininger
Geauga Co. Job and Family Services
12480 Ravenwood Dr.
Chardon, Ohio 44024

The information provided will be reviewed. You will be contacted regarding your request.
OFFICE USE ONLY **********OFFICE USE ONLY

Amount Approved: _____Date: _____ Funding Source: _____

Parent Contribution: _____ Encumbrance completed: _____ Yes _____ Camp will bill

Denied: _____ Reason_____