

## HSPC Emergency Fund Request

**Date:** \_\_\_\_\_

**Funds Requesting:** \$ \_\_\_\_\_

Check issued to:	Comments:
Street Address	
City, State, Zip Code	

Purpose/Use of the Funds:

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Parent Representative Approval:     Yes  
   No  
   Unable to reach, requires signature from FEM Manager and EHS  
  Comprehensive Services Director/Executive Director

\_\_\_\_\_  
FEM Manager

\_\_\_\_\_  
Comprehensive Services Director

Families who receive assistance from the fund are encouraged, but not required, to select an activity below, to complete while they have a child enrolled.

- Attend/Participate in an HSPC Emergency Fund Fundraising Event (Contact Amy Ahrens)
- Attend a Family Fun Night or Other Agency Socialization Event
- Spend time in Child's Classroom
- Engage in School-Readiness Activities with Child at home (Teacher available for Suggestions/Activities)

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date