



Grant A Wish, Inc School Program

APPLICATION FOR SCHOOL SUPPLIES

This application is for economically disadvantaged students in the greater Chicago land area. Our school program is a year round program, but we have two major giveaways, September & December of each school year. We give away what we have in stock at the time of the application, but we generally have bookbags and general school supplies. We are working to expand our school program, so we can have more of a variety of school supplies available. We also provide emergency assistance year round for special circumstances for school supplies.

Mail application: Grant A Wish, Inc School Program P.O. Box 17698 Chicago, IL 60617-0698

Date ___ / ___ /2017 (Parent or Guardian should fill out application.)

Name of Parent/Guardian _____

Home Address _____ Apt # _____ City _____ State _____

Zip Code _____ Your contact # () _____ - _____ Name of your child _____

Age _____ Sex _____ Name of child's school? _____ Grade _____ Are you needy ___ disabled ___ abused ___ child?

To be eligible your child or children will need you to copy & mail with this application proof of income or a letter from your case worker: SSI ___ Public Aid Card or Letter ___ ILL Link Card Documentation ___ Medicaid/Medical Card ___ other _____. We appreciate your cooperation.

If you are approved to receive school supplies can you pick them up? Yes ___ No ___ Would you like to be on our mailing list? Yes ___ No ___ How did you hear about this program? _____

Would you like to received emails? Yes ___ No ___ Do you have an email account? Yes ___ No ___

If yes list your email account?: _____

SCHOOL SUPPLY LIST: All school supplies are given based on availability.

Thank You for your application: (check one or more) What do you absolutely need?

- Bookbag ___ Spiral Notebooks ___ Three Ring Binder ___ Folders ___ Three Ring Paper ___ Ruler ___
- Pencils ___ Pencil sharpeners ___ (Pens: Blk ___ Red ___ Blue ___) Glue Bottle ___ Glue stick ___ Crayons ___
- Erasers ___ Calculator ___ Protractor ___ Paper Clips ___ Scissors ___ Markers ___ Childrens books ___

List any additional school supplies needed that is not listed: _____

You will receive an email or a call on your phone with a response to your application.

If you have any school supplies you want to donate or trade with us, just let us know.

FOR OFFICIAL USE: Date request received ___ / ___ /2017 Will request be granted? Yes ___ No ___

Wish Committee review date ___ / ___ /2017 What date will the supplies be available for pick up? ___ / ___ /2017 Were all the supplies available? Yes ___ No ___ If not what was unavailable _____

Will the supplies be made available later? Yes ___ No ___ Authorization by _____ Title _____ Date ___ / ___ /2017