

# The Panther Fund Financial Assistance Request Form



The Panther Fund is a non-profit organization, independent of West Ottawa Public Schools, that provides financial assistance to students who want to participate in extracurricular or academic activities and are unable to do so due to financial or accessibility constraints.

*To qualify for assistance, please complete the form below, including student information, list of items requested with specific related costs (up to a total cost of no more than \$100 per semester/athletic season), signature from students parent/guardian, appropriate faculty signature, and turn it in to your counselors office or athletic department respectively for final approval determination (list of primary contacts below).*

*Only West Ottawa students participating in West Ottawa sanctioned events/activities are eligible.*

For more details as to which programs or supplies that are applicable for coverage, please check out our website [www.thepantherfund.org](http://www.thepantherfund.org) or reach out to us directly at [info@thepantherfund.org](mailto:info@thepantherfund.org)

High School Athletics:	High School Academics:	Macatawa Bay MS:	Harbor Lights MS:
Bill Kennedy:	Devon Hopman	Jake Manning	Joe Diekevers
Athletic Director	Counselor	Principal	Assistant Principal
kennedyb@westottawa.net	hopmand@westottawa.net	manningj@westottawa.net	diekeversj@westottawa.net

**Date:** \_\_\_\_\_ **Extracurricular Activity** (circle one): Athletics Arts Academics Music Other

**Organization/Class** (specific ie: Varsity Football): \_\_\_\_\_ **Season/Semester:** \_\_\_\_\_

Items Requested	Price
<b>Total Cost for Requested Coverage</b>	

**Student Name:** \_\_\_\_\_

**Grade** (circle one): 7th 8th 9th 10th 11th 12th **School:** \_\_\_\_\_

**Gender:** Male Female **Parents Email:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Parent Signature:** \_\_\_\_\_

**Coach/Faculty Name:** \_\_\_\_\_ **Faculty Signature:** \_\_\_\_\_

*(to be completed by approving office/administrator)*

**Approved:** (circle one) Yes No **Amount Approved:** \_\_\_\_\_

**Approved By:** \_\_\_\_\_ **Approved By Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_ **Music Voucher Number #:** \_\_\_\_\_

**Emailed to Panther Fund Admin:** Yes No