



**PreK-8 ONLY**

**UNIFORM ASSISTANCE APPLICATION**

**SCHOOL NAME:** \_\_\_\_\_

**FAMILY INFORMATION (PLEASE PRINT IN INK):**

<b>PARENT/GUARDIAN NAME:</b>	_____	
<b>HOME ADDRESS:</b>	_____	<b>ZIP CODE:</b>
<b>HOME PHONE:</b>	_____	
<b>WORK/OTHER PHONE:</b>	_____	

**STUDENT INFORMATION (PLEASE PRINT IN INK):**

STUDENT ID NUMBER <small>No Social Security Numbers</small>	NAME OF STUDENT			BOY/ GIRL	GRADE	DATE OF BIRTH	TOP SIZE	BOTTOMS SIZE	BOTTOMS COLOR / TYPE <small>Khaki, Navy Blue, Black / Pants, Skirt, Skort</small>	*TO BE COMPLETED BY SCHOOL STAFF
	LAST	FIRST	MIDDLE							ECONOMICALLY DISADVANTAGED YES or NO <small>(If no, do NOT submit)</small>

I certify that all information I have submitted on this application is true and accurate. I understand that if any fraud is detected or suspected I will be reported immediately to the Police and Security Services Department. **I herein authorize campus staff to access information on my application to confirm my student's economically disadvantaged status in order to verify my need for assistance. This information should not be shared nor used for any other purpose.**

**FOR USE BY CAMPUS STAFF ONLY**

1. Ensure that the application is complete with parent signature and date.
2. Verify Student ID Number(s)
3. Obtain Socioeconomic Information Form data (i.e., through MyData Portal or Chancery).
4. Confirm student is listed as economically disadvantaged before submitting application
5. Keep original document and give a copy to the parent.

\_\_\_\_\_  
Signature of Parent/Guardian Date

Approved: \_\_\_\_\_ **OR** Not Approved: \_\_\_\_\_

Student Information Verified By: \_\_\_\_\_

Uniform Coordinator Signature: \_\_\_\_\_

Date of Uniform Order: \_\_\_\_\_ Date Received on Campus: \_\_\_\_\_