



CENTER for  
COMMUNICATION  
HEARING &  
DEAFNESS

# Family Learning Vacation 2010 Scholarship Application

If your family needs financial assistance to attend Family Learning Vacation, please answer the following questions and return to CCHD along with your FLV registration form by **June 30**. Please note, only partial scholarships will be awarded, and only a limited number of scholarships are available. Special consideration will be given to first time attendees.

All applications will be reviewed by the FLV scholarship committee and applicants will be contacted with results by **July 14**. All information is confidential and will be used solely for determination of the current year's scholarship awards. Decisions are at the sole discretion of the FLV committee. Scholarships have been made possible by a grant from **SAY (Safe Alternatives for Youth)**.

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• **Contact information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

• **Number of people in your family:** \_\_\_\_\_ • **Total Household Income:** \$ \_\_\_\_\_

• **Number of d/Deaf or hard of hearing children in your family** *(please include ages of each child):*

\_\_\_\_\_

• **Special Circumstances / Information to be Considered:** \_\_\_\_\_

\_\_\_\_\_

• **Have you ever received an FLV scholarship in the past?** YES / NO

• **How much are you able to contribute toward your registration fee for the 2010 FLV weekend?**

75% of the Cost      50% of the Cost      25% of the Cost      Other: \_\_\_\_\_

**Please return by June 30 WITH your registration form to:**

**CCHD/FLV**

**10243 W. National Avenue**

**West Allis, WI 53227**

**kmalak@cchdwi.org**

10243 W. National Ave. West Allis, WI 53227  
414-604-2200 (Voice) • 414-604-7217 (TTY) • Fax: 414-604-7200  
Website: [www.cchdwi.org](http://www.cchdwi.org)



United Way  
of Greater Milwaukee