



COLLEGE SUCCESS PROGRAM GRANT APPLICATION

Transportation Grant

Notes:

- **Incomplete forms will not be accepted.**
- **You must make your request two weeks in advance of your departure travel. Tickets will not be purchased after the deadline has passed.**

Name:	Address:	Home Phone:
Date of Birth:	ZIP:	Cell Phone:
E-Mail:	EFC:	
College Attending:	Major:	

Is this for a roundtrip ticket? _____ YES _____ NO	What transportation are you taking? _____ Subway _____ Bus _____ Train _____ Other Vendor Name: _____ (ex. Trailways)	Locations: Travel from _____ Travel to _____ <i>Include Station Name (ex. Penn Station)</i>
What date do you want to leave? Day _____ Month _____ Time of day _____ What date do you want to return? Day _____ Month _____ Time of day _____	Reason for Travel <ul style="list-style-type: none"> <input type="checkbox"/> Beginning/End of semester <input type="checkbox"/> Semester break/vacation <input type="checkbox"/> Summer orientation (including EOP or HEOP) <input type="checkbox"/> Placement Exams <input type="checkbox"/> Portfolio Review or Audition <input type="checkbox"/> Family Emergency Other _____	
Cost of Ticket: \$ _____		

I, _____ agree to use any awarded grant money on the items/costs specified on this application, to attend all classes, do all my assignments, and report mid-term and final grades to my Success counselor. I will keep my counselor informed of my academic progress throughout the school year.

Signature: _____

Date: _____

For office use only:

Charge to: HESC ADMIN

Approved by counselor:

Date:

Final amount of purchase:

Counselor notes: