



Technology Service Corps MetroCard Scholarship Application

Name: _____

Social Security Number: _____

Date: _____

FINANCIAL INFORMATION

Your current weekly income: _____

Who do you live with (check all that apply): Mother Father
Grandparent Guardian who is not Mother, Father, or Grandparent, please
describe: _____

Your caregiver's weekly income: _____

How many people live in your household?

Are you on Public Assistance? yes no

Please describe what type of assistance you receive? _____

Do you have any dependants? yes no

Please describe in more detail: _____

MetroCard Requested Amount:

In 500 words or less, write a narrative explaining your reasons why you can't afford to pay for a MetroCard on your own.