



## Educational Benefit Form

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

Student ID: \_\_\_\_\_

Reimbursement Type (example: PE equipment, field trip, etc.): \_\_\_\_\_

Item for which Reimbursement is Requested (the item you purchased or plan to purchase):

Learning subject area(s) (for example: math, reading, physical education, social development):

Supporting curriculum or course description (curriculum or course with which the item requested will be used; curriculum may either be purchased or parent-designed. **Note:** This section required for Cooking, Gardening, Mechanical, and Woodworking Equipment and Supplies):

How will this item help my student learn? (Describe **in as much detail as you can** how this purchase will benefit your student's education):

Cost of purchase: \_\_\_\_\_

Place of purchase: \_\_\_\_\_

Date of purchase: \_\_\_\_\_

Link to website where item was purchased (if applicable; please provide the url to the purchased item): \_\_\_\_\_

I affirm that scholarship program funds are used only for authorized purposes as described in Florida Statutes 1002.394(4) or 1002.395(6), as applicable, and serve the listed student's educational needs.

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

Parent Signature: \_\_\_\_\_

**PLEASE NOTE:** Any violation of the FES/FTC scholarship statutes, rules, policies, or procedures may result in the loss of the scholarship, ineligibility for future scholarships, or financial or criminal penalties. Please review the Parent Handbooks for [FES-UA](#) or [FES-EO/FTC](#).