

Applicant's name (Last, First) _____,

SCHOLARSHIP APPLICATION SIGNATURE PAGE

THIS SIGNATURE PAGE NEEDS TO BE SIGNED AND SUBMITTED ONLY IF YOU HAVE APPLIED FOR SCHOLARSHIP

APPLICANT'S PARENTS/LEGAL GUARDIANS

(Must be signed by all custodial parents and guardians of Applicant)

The person named above is my/our child/ward ("Applicant"), is my/our dependent for federal income tax purposes, and is named as a dependent on the tax return transcript provided in support of the Application for Scholarship submitted with Applicant's application for the participation in the Youth Ambassador Exchange Program.

I/We herewith apply for scholarship. I/We acknowledge that funds are limited, and that application does not guarantee that scholarship will be granted, regardless of the timing of application receipt, and without regard to the receipt or treatment of applications for scholarships by others.

I/We understand that any scholarship awarded will not be paid directly to me/us, but will be applied to reduce the costs for which the applicant is responsible. I/we understand that financial information provided in the scholarship application will be shared with the program staff and committee.

I/We certify on penalty of perjury that the foregoing and the financial information submitted in the Scholarship Application are true and correct.

(If only one parent's or guardian's signature is provided) I represent and warrant that I am not married, and that I am the sole parent or guardian of Applicant. This representation and warranty will survive the termination of this process.

| Party | Signature(s) | Date |
|-------------------|--------------|------|
| Applicant | | |
| Parent 1/Guardian | | |
| Parent 2/Guardian | | |