



**OSHER LIFELONG LEARNING INSTITUTE
AT GEORGE MASON UNIVERSITY**



FINANCIAL ASSISTANCE APPLICATION

The Board of Directors of OLLI at Mason encourages members to become full members and renew membership annually. Members or potential members who are experiencing a financial hardship should use this application to request assistance.

**** Members are encouraged to pay an amount that they can afford.****

**PLEASE SUBMIT TO THE REGISTRAR AT TALLWOOD WITH YOUR COMPLETED OLLI
REGISTRATION FORM.**

NAME _____

ADDRESS _____

PHONE NUMBER _____

E-MAIL _____

**AMOUNT OF PAYMENT : \$_____

AMOUNT OF ASSISTANCE REQUESTED: \$_____ (ANNUAL FEE MINUS PAYMENT)

EFFECTIVE DATE: _____

JUSTIFICATION:
(Please give a brief rationale for your request)

Signature of Applicant

Date

OFFICE USE ONLY

Received by/date: _____

Executive Director approval: _____

Registrar processing: _____

Response sent: _____

Finance Associate processing: _____