

Student Details Support Person Details Student name: _____ Name: _____ Date of Birth: Role in organisation: School: Organisation name: _____ School year: Connection to student: Address: Briefly outline the relevant family circumstances Parent/Guardian Details Name: _ I agree to the conditions of assistance Specific child/youth needs (if applicable) Signature: _____ For office use I hereby recommend (name of student) Sponsorship approved for assistance through Zion's Sponsorship programme. Application declined I agree, that to the best of my knowledge, the applicant is worthy of the assistance applied for. Reason/Action taken: Phone: Signature: _____ Date: _____