

FINANCIAL INFORMATION SECTION

The following budget information is to be completed by all applicants who will be requesting financial assistance.

Section A is your financial situation to date, NOT including additional training costs. Determine all costs and expenses related to your training and fill in Section B.

SECTION B	TRAINING EXPENSES FOR: _____ <small style="float: right;">(PRINT NAME)</small>
<ul style="list-style-type: none"> • COSTS DIRECTLY RELATED TO YOUR EDUCATION/TRAINING 	

Training Expenses	Costs for Training	Amounts to be Funded by Other Contributors	Amounts Requested from OTDC
Registration Fees			
Tuition			
Student Fees			
Books			
Supplies			
Tools			
Uniforms			
Footwear			
Accommodation (living away from home costs)			
Transportation			
Travel			
Childcare			
Disability Needs			
Other Expenses: (list below)	Other Costs:	Other Expenses Funded:	Other OTDC Amounts:
Training Totals			

The information provided in Section A and Section B is true and correct I understand that this information may be used to determine the funding support I am requesting	
APPLICANT SIGNATURE <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	DATE SIGNED <div style="border: 1px solid black; height: 40px; width: 100%;"></div>