



Financial Assistance Application Form

The **“Freeing Voices, Changing Lives”** Scholarship Fund is made possible through individual and corporate donor support. Since funding is limited, to qualify for a scholarship at the American Institute for Stuttering (AIS) all other means of financial assistance must be exhausted, such as your health insurance and state vocational rehabilitation services. Scholarship awards are valid for one year from the award date.

The AIS financial committee will take into consideration your proposed fee(s) for service. The final amount awarded however will be largely determined based on your **financial documentation** and **personal narrative**. Therefore, please provide any supplemental supportive information that you would like to have considered.

Please fill out all **4 Sections of the Application**.

Incomplete applications will not be considered!

Person filling out the Application:

.....

Date

Section 1— Applicant Information

Name (who this therapy is for)

Date of Birth / /

Address APT #

.....

Home Phone (.....) Cell Phone (.....)

Email Address

Section 2 — Selection of Services

- 1. Place a check mark beside the service(s) you are interested in**
- 2. Indicate the amount that you are requesting to pay for that service**

SERVICES FOR ADULTS

Individual Services

..... **Consultation Session** (\$200) Currently can afford \$_____

..... **Individual Therapy** (\$180) Currently can afford \$_____

Group Services

..... **1-Week Immersion** (\$2,500) Currently can afford \$_____

..... **1-Day Workshop** (\$350) Currently can afford \$_____

..... **Weekend Workshop** (\$700) Currently can afford \$_____

..... **Other** (Specify the offering you are applying for) * Currently can afford \$_____

**see AIS website for offerings and dates | www.stutteringtreatment.org*

SERVICES FOR CHILDREN/TEENS

Individual Services

..... **Consultation Session** (\$200) Currently can afford \$_____

..... **Speech Evaluation and Report** (\$625) Currently can afford \$_____

..... **Individual Therapy** (\$180) Currently can afford \$_____

Group Services

..... **1-Week Teen Immersion** (\$2,000) Currently can afford \$_____

..... **One-Hour Group Therapy** (\$80) Currently can afford \$_____

Section 3 — Financial Information

(This information will be kept confidential)

Please include:

- 1) A copy of your most recent **Federal Tax Return** (or if you do not file, the tax returns of those who will be responsible for payment)
- 2) **2 recent paycheck stubs** from each working household member
- 3) If applicable, documentation of other sources of income (e.g. Student Loans, Social Security, Disability, etc.)

Place of Employment (for self, parent(s), and/or guardians) including **phone number** and **years employed at present job**

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.....
.....

Number of dependents

AIS IS AN OUT-OF-NETWORK PROVIDER. WE DO NOT ACCEPT INSURANCE.

I confirm that I have inquired with my healthcare insurance provider and am **not eligible for coverage** for out-of-network stuttering therapy _____ (*initial here*)

My insurance will reimburse me \$ _____

If applicable, please explain

.....

I assert that all of the information on this form is accurate to the best of my knowledge.

Print Name

Signature

Date

Section 4 — Financial Narrative

(Continue Section 4) 

(This must be completed in order to have the application considered. Any missing pieces will delay the process.)

Please provide a **detailed narrative** describing your current financial need. Since financial documents do not always provide a full picture of one's personal situation, mention any special circumstances you would like the committee to consider while reviewing your application. (You may continue your narrative if more space is needed onto the back of the form or additional pages.)

Submit your application to:

American Institute for Stuttering
27 West 20th Street, Suite 1203
New York, NY 10011

or

scan and email to:
admin@stutteringtreatment.org

Any Questions? Email: admin@stutteringtreatment.org | Phone: 212.633.6400 | Fax: 212.220.3922