



Dear Newcomerstown West L.E.A.D. Family,

Based on household income, your student “**may**” be eligible for the L.E.A.D. gas voucher program; a program that helps you with the cost of transporting your student home from the afterschool program. Please fill out the attached application and return it to school.

Your application will be reviewed and you will get back papers explaining the gas voucher process. If eligible, you will be given a stamped voucher two times per month, which will be good for a specific amount of gasoline at a local station. *You must turn in an application to receive a gas voucher, if deemed eligible.*

Thank you for your participation in the L.E.A.D. Grades 2-5 after-school program. If you have questions about the gas voucher program or any other part of the program, please feel free to contact us.

Best regards,

Cindy Staggs
Newcomerstown West Elementary L.E.A.D. Program
Site Coordinator



L.E.A.D. Gas Voucher Application

Families who take part in the program will get a stamped, authorized voucher good for a specific dollar amount of gas at Baker's IGA gas station. The amount of the gas voucher is based on the student's attendance at the afterschool program, over a two-week period. Please fill out this form to participate in the gas voucher program.

Please send this form back to school with your student. When we receive your form, you will be given a packet with further details about the gas voucher program.

Student's Name: _____ **Grade:** _____

School: _____

Student's Address: _____

City: _____ **State:** Ohio **Zip Code:** _____

Parent's Phone Number: _____

Parent/Guardian Name(s): _____

Parent/Guardian who will receive the gas voucher (please list only one):

***Gas vouchers will be issued only to a parent/guardian of the student listed above. The only exception is if parents/guardians have court-ordered shared parenting rights. If this is the case, please note above.*

Please check all that apply.

_____ I am currently enrolled in a food assistance program through Tuscarawas County Jobs and Family Services. *If available, please list case number* _____

_____ I have a household income form on file in the school's cafeteria program.

Parent/Guardian Signature: _____

Date of Signature: _____

Office use only:

The gas voucher application forms should be given to the L.E.A.D. Site Coordinator.

Roundtrip Distance from School to Residential Address of Child: _____ *miles*

Date Received: _____ *Site Coordinator's Signature:* _____