INHSRA Hard Luck Assistance Request Form

Date: _____

Contestant Name:_____
Grade_____

Have you received Hard Luck Assistance from INHSRA in the past? If so when: _____

Please explain details of why assistance is being requested:

Committee Determination: _____ Approved _____ Amount _____ Denied

Committee Notes/Determining Factors:

Signatures:

_____ _____
INHSRA President *Date*

_____ _____
INHSRA Treasurer *Date*

_____ _____
INHSRA Student Advisor *Date*

Revised August 2024