

REQUIRED AFFIRMATIONS FOR CHILD OF EMPLOYEE APPLICANTS

To be filled out and signed by Applicant

I, _____ (Name of Applicant), hereby affirm on oath that I satisfy the eligibility requirements of La Michoacana Foundation’s Scholarship for Excellence as set forth herein, including that I am the child, either biological or adoptive, of _____ (Name of Employee), an employee of La Michoacana Meat Market, or other eligible related company as defined above.

Applicant Signature

Print Name

Date

To be filled out and signed by Applicant’s Parent who is also an Employee

I, _____ (Name of Employee), hereby affirm on oath that _____ (Name of Applicant) is my child, either biological or adoptive, and that I am an employee of La Michoacana Meat Market, or other eligible related company as defined above.

Employee Signature

Print Name

Date