



**SAT Preparation Project**  
**Stipend Request Form**

Please Print or Type All Information.

**Name of Center/Church/Organization:** \_\_\_\_\_

**Course Location:** \_\_\_\_\_

Street

City

**Course Beginning Date:** \_\_\_\_\_

**Course Ending Date:** \_\_\_\_\_

**Name of Course Instructor:** \_\_\_\_\_

**Course Instructor Telephone:** \_\_\_\_\_

This is a request for the stipend for the course referenced above.

By signing this request form below, the undersigned hereby certifies the following:

- 1) the SAT Preparation course referenced above has been conducted in its entirety and has been taught utilizing the FEF's curriculum outline, and the students in the course have completed all class hours prescribed in that curriculum;
- 2) a student roster for each of the course's class sessions has been submitted to the FEF, listing the names and additional required information for at least 10 students;
- 3) both a pre- and a post-test have been administered to all students attending the course, and pre- and posttest results have been submitted to the FEF; and
- 4) the completed Time & Effort Log for the course instructor(s) has been submitted to the FEF.

**Instructor Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Payment should be made payable to:** \_\_\_\_\_

Name of Person or Entity (*If person, include completed IRS Form W-9*)

**Payment should be sent to:** \_\_\_\_\_

Street

City

State

Zip

**Signature of Center/Church/Organization Authority:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_