



Office of Lifelong Faith Formation (OLFF)  
 510 Ocean Ave.  
 Portland, ME 04103  
 Phone: 207-773-6471  
 Fax: 207-773-0182  
 Email: OLFF@PortlandDiocese.org

**Financial Assistance Request**

EVENT NAME: **2019 March for Life Adult-Only Bus**

LOCATION: **Washington, DC**

DATE(S): **January 17-19, 2019**

REGISTRATION FEE: **Quad Occupancy = \$318**  
**Triple Occupancy = \$345**

Submit form to the OLFF via e-mail ([OLFF@PortlandDiocese.org](mailto:OLFF@PortlandDiocese.org)) or fax (207-773-0182) before **September 29, 2018**  
 Only **complete, legible forms** will be considered. Applicant typically notified of decision within 48 hours of receiving request.

MAXIMUM AVAILABLE ASSISTANCE: **\$150/person paid directly to Dube Travel** as a grant from the Catholic Foundation of Maine (total of 10 grants available)

ELIGIBILITY: **To be eligible for assistance a college student must be:**

1. currently enrolled as an undergraduate at a college or university in Maine,
2. actively involved in campus ministry or a local Catholic parish,
3. willing to reserve a spot in the trip at the quad or triple occupancy rate, and
4. able to secure a spot on the trip by completing the Dube Travel reservation form by the specified due dates and paying the remaining trip costs.

**PARTICIPANT SECTION:** *filled out COMPLETELY by the person requesting financial aid.*

Name (First and Last): \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone #: \_(\_\_\_\_) \_\_\_\_\_

College/University (Name, City): \_\_\_\_\_

Area(s) of Study: \_\_\_\_\_ Enrollment status (check one)  Full-time  Part-time

Current Student Classification (check one)  Freshman  Sophomore  Junior  Senior

Current or Home Parish/Campus Ministry (Name and City): \_\_\_\_\_

1. Please briefly explain why you would like to participate in the March for Life:

2. What do you hope to gain from this experience? How will you apply/use what you learn?

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**RECOMMENDING PARISH/CAMPUS MINISTRY LEADER SECTION:** *filled out COMPLETELY by a priest, parish catechetical leader, or campus minister in support of applicant's participation in the Maine Adult-Only bus trip to the 2019 March for Life.*

NAME(print): \_\_\_\_\_ PARISH/CAMPUS \_\_\_\_\_

POSITION: \_\_\_\_\_ PHONE #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**OLFF Use Only:** Date Received: \_\_\_\_\_ Approved: Y / N Initials: \_\_\_\_\_  
 Date Participant Notified \_\_\_\_\_ Initials: \_\_\_\_\_ Date Payment Request sent for Dube \_\_\_\_\_ Initials: \_\_\_\_\_