

The
Melanie J. Powell
Memorial Fund 



Application for Funding (Please feel free to continue your answers on additional pages)

NAME _____ AGE _____

ADDRESS _____

TOWN _____ ZIP CODE _____

TELEPHONE _____ CELL _____

EMAIL _____

DATE OF CRASH _____ TOWN _____

Describe what happened:

How were you affected?

What problems do you face today and for the future?

Please describe in detail how funding from the Melanie Powell Memorial Fund will be used.

References: Please provide the names and contact information for three character references.