



The Children's Fund
Our Children. Our Future.

Share Your Experience!

Share Your Experience!	
Scholarship Recipient Name:	
Activity:	
Date of Activity:	
Tell Us About Your Experience: (What did you enjoy most? What did you learn? How did this activity positively impact you?)	
Caregiver/ Social Services Provider Comments:	

THANK YOU!

Please email to: info@ourchildrensfund.com