Project Waipuna

Stipend Request Form

Please type or print legibly. Complete all items.

1. Name: __________________________________________   (Last Name)  __________________________________________   (First Name)  __________________________________________   (Middle Initial)

2. Position: __________________________________________

3. School: __________________________________________

4. Contact Information:
   Let us know the best way(s) to contact you. (Please ✓ and complete at least one.)
   ❑ School phone: __________________________
   ❑ Home phone: __________________________
   ❑ Other phone: __________________________
   ❑ Email: __________________________

5. Name and date of event(s) for which you are requesting a stipend:
   Event: __________________________________________ Date: __________________________
   Event: __________________________________________ Date: __________________________
   Event: __________________________________________ Date: __________________________

6. Have you ever received a stipend from Project Waipuna in the past?
   Please circle: YES / NO

Please be sure to include the following with this request:

☞ Original WH-1 form if this is your first time requesting a stipend from Project Waipuna. The form is available at: www.hawaii.edu/wccc/waipuna/support.htm

☞ Your receipt or proof of payment.

☞ Your passing score/grade if the stipend is for PRAXIS or course registration. (No grade is needed for the online PRAXIS preparation course.)

☞ A copy of your Hawaii Teacher Standards Board Certificate of License or note explaining your status with this process if the stipend is for PRAXIS.

☞ A copy of your DOE paystub if you are a PTT AND this is your first time requesting a stipend from Project Waipuna.

Mail the completed Stipend Request Form and the above enclosures to:
Project Waipuna-WCCC
College of Education, University of Hawaii
1776 University Avenue, UA2
Honolulu, HI 96822

Be sure to keep copies for your records.