

**Office of Children's Services
Independent Living Program
Request for Funds
For In-Custody Youth**

Please send completed request to:

Independent Living Program Coordinator / Dee Pearson
Office of Children's Services
PO Box 110630
Juneau, AK 99811
(907) 465-8659 Direct Line, (907) 465-3416 FAX
Dee.pearson@alaska.gov

PLEASE PROVIDE US WITH THE FOLLOWING INFORMATION. BE VERY DETAILED WITH YOUR REQUEST.

Name: _____

Date of Birth: _____ **Social Security Number:** _____

Phone Number & Email Address: _____

I am requesting independent living funds to purchase:

The amount of my request is:

I would like to purchase my item at:

I am requesting this money because:

This purchase will help me with Independent Living by: