



PROOF OF ELIGIBILITY FOR TDF'S GRADUATION GIFT
PLEASE PRINT CLEARLY

I, _____, am a senior attending the
[STUDENT FIRST AND LAST NAME]

following high school, _____.
[FULL SCHOOL NAME]

I expect to graduate in 2024 from this New York City public or charter school and need to confirm the details below to claim **TDF's Graduation Gift for a FREE one-year membership.**

[STUDENT SIGNATURE]

[DATE]

If you have an OSIS #, please complete this form online. If not, please have a school administrator, guidance counselor, or teacher fill out the form below. Once it's completed and signed, please email a scan or photo of this form to poe@tdf.org.

TO BE COMPLETED BY A SCHOOL OFFICIAL

I attest the details on this form are accurate and the student will be graduating in spring 2024.

[PRINT FIRST AND LAST NAME OF SCHOOL OFFICIAL]

[TITLE OR ROLE]

[SCHOOL OFFICIAL SIGNATURE]

[DATE]

[OPTIONAL, OSIS # FOR THE STUDENT ABOVE]