Instructions to Summer School
For Invoice and Grades & Attendance Forms

Invoice (Submitted 2 days after school starts)
Please include the following on your invoice:
1. School Name and Address
2. Remittance - Name and Address
3. Date - Current Date (DO NOT BACK DATE)
4. Invoice Number (Number chosen by the school for tracking purposes)
5. Student(s) - Last and First Name(s)
6. ALU LIKE, Inc.’s Native Hawaiian Summer School Assistance Program Voucher Number
7. Course
8. Tuition Amount - (NOT TO EXCEED AMOUNT SHOWN ON VOUCHER)
9. Total Invoice Amount Due to School
10. Signature of School Representative
11. Printed Name and Title of School Representative
12. Email Address of School Representative
13. Telephone Number of School Representative

Multiple invoices may be submitted if needed.
Invoices must be submitted BEFORE JULY 21, 2021

Grades & Attendance
The submission of grades and attendance for all students is required by our funder.
Please include the following on your grades and attendance form:
1. School Name and Address
2. Date - Current Date
3. Total number of summer school days offered
4. Student(s) - Last and First Name(s)
5. ALU LIKE, Inc.’s Voucher Number
6. Course
7. Summer School GRADE (NOTE: If grades are not given, please indicate it on this form)
8. Total number of days ABSENT
9. Signature of School Representative
10. Printed Name and Title of School Representative
11. Email Address of School Representative
12. Telephone Number of School Representative

Failure to adhere to the above may result in discontinuation of financial assistance through the program.

Summer School Grades and Attendance
Must be submitted BEFORE JULY 23, 2021

You may use the attached forms or you may use one of your own.
The ALU LIKE, Inc. forms attached can be downloaded from our website: www.alulike.org/nhssap
BILL TO:
ALU LIKE, Inc.
Native Hawaiian Summer School Assistance Program
2969 Mapunapuna Place, Suite 200
Honolulu, Hawai‘i 96819

DATE: Insert current date

INVOICE NO.: Insert your control invoice number

Enter your school’s name and check payable information in the space provided

SCHOOL NAME:

MAKE CHECK PAYABLE TO:

SUMMER SCHOOL COST for the following STUDENT(s):

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Voucher No</th>
<th>Course</th>
<th>Tuition Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kai</td>
<td>Moana</td>
<td>135</td>
<td>English II</td>
<td>190.00</td>
</tr>
<tr>
<td>Lei</td>
<td>Ana</td>
<td>147</td>
<td>Algebra II</td>
<td>190.00</td>
</tr>
</tbody>
</table>

TOTAL INVOICE AMOUNT DUE TO SCHOOL $380.00

You may submit more than one invoice if needed

Submit invoice 2 days after the start of Summer School

School Representative - Signature

Print Name and Title

Revised: 03/10/2021
## GRADE(S) & ATTENDANCE

**SUBMIT TO:**  
ALU LIKE, Inc.  
Native Hawaiian Summer School Assistance Program  
2969 Mapunapuna Place, Suite 200  
Honolulu, Hawai‘i 96819

**DATE:**  
Insert current date

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Voucher #</th>
<th>Course</th>
<th>Grade</th>
<th>Days Absent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kai</td>
<td>Moana</td>
<td>135</td>
<td>English II</td>
<td>A</td>
<td>0</td>
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<tr>
<td>Lei</td>
<td>Ana</td>
<td>147</td>
<td>Algebra II</td>
<td>A</td>
<td>1</td>
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</tbody>
</table>

**Completion of this form is a requirement of our funder**  
**Complete ALL columns**  
**SUBMIT NO LATER THAN JULY 23, 2021**

If grades are not given, please indicate it on this form.

**School Representative - Signature**  
**Phone No.**

**Print Name and Title**

Revised: 03/10/2021
BILL TO: ALU LIKE, Inc.
Native Hawaiian Summer School Assistance Program
2969 Mapunapuna Place, Suite 200
Honolulu, Hawai'i 96819

DATE: ________________

SCHOOLS NAME: ____________________________________________

MAKE CHECK PAYABLE TO: ______________________________________

Voucher Tuition

#   Amount

Phone No._____________________________________________________

Email ___________________________ Revised: 03/10/2021

ALU LIKE, Inc.
2969 Mapunapuna Place, Suite 200
Honolulu, Hawai'i 96819

DATE: ________________

INVOICE NO.: ______________________

SUMMER SCHOOL COST for the following STUDENT(s):

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TOTAL INVOICE AMOUNT DUE TO SCHOOL $
GRADE(S) & ATTENDANCE

SUBMIT TO:
ALU LIKE, Inc.
Native Hawaiian Summer School Assistance Program
2969 Mapunapuna Place, Suite 200
Honolulu, Hawai’i 96819

DATE: ____________________________

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<th>Course</th>
<th>Grade</th>
<th>Days Absent</th>
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Total School Days

If grades are not given, please indicate it on this form.

School Representative - Signature

Phone No.

Print Name and Title

Email

Revised: 03/10/2021