

# TRINITY LUTHERAN CHURCH & SCHOOL

## *Application for Tuition Assistance* *School year: 2011-2012*

<b>Applicant</b>	<b>Co-Applicant</b>
Name (Last, First):	Name (Last, First):
Address:	Address:
City, State, Zip	City, State, Zip
Home phone:	Home phone:
Work phone:	Work phone:
Cell phone (if any):	Cell phone (if any):
Number of dependents:	Number of dependents:
Name of home congregation:	Name of home congregation:
Denomination:	Denomination
Pastor's Name:	Pastor's Name:
Pastor's phone number:	Pastor's phone number:
<b>Employer:</b>	<b>Employer:</b>
Net monthly income:	Net monthly income:
Other monthly income (include child support, alimony, etc.):	Other monthly income (include child support, alimony, etc.):
Source:                      Amount:	Source:                      Amount:
Source:                      Amount:	Source:                      Amount:
Source:                      Amount:	Source:                      Amount:
<b>Monthly Payment Obligations</b>	
Mortgage or Rent:	Car payments:
Alimony/child support:	Car payments:
Credit card payments (list separately):	Other monthly payments (list separately):
	Payee:                      Amount:
	Payee:                      Amount:
	Payee:                      Amount:
	Payee:                      Amount:
	Payee:                      Amount:

### Name, Grade and Monthly Tuition for Each Child

Child's Name	Grade	Monthly Tuition
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Total monthly tuition    \$ \_\_\_\_\_

Monthly amount family can commit to pay <sup>1</sup>    \$ \_\_\_\_\_

Balance (Monthly amount of Grant-in-Aid needed)    \$ \_\_\_\_\_

<sup>1</sup> You **must** complete this line. Applications failing to provide this information will **NOT** be considered.

**Important:** Please enclose a photocopy of your completed federal tax returns for the most recent tax year. Include copies of your W-2 forms, proof of social security income (if applicable), other income forms, and supporting schedules. Please complete BOTH sides of this form and return it to the school office.

**PARENT STATEMENT**

Please describe any unusual circumstances or include additional information that will assist us in our consideration of your tuition assistance request. (Attach a separate sheet if necessary).

**I certify that the above information is accurate and complete. I understand that I will be asked to provide some type volunteer service(s) to Trinity Lutheran Church & School and I am willing to volunteer my time.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_