

**First Lutheran School  
Financial Aid Application  
2018-2019 School Year**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Student(s) name \_\_\_\_\_

Grade (s) \_\_\_\_\_

Amount of financial aid requested \_\_\_\_\_

**Must be filled in.  
You will not be considered, if it's not filled in.**

All of the following must be included for this application to be considered:

- \_\_\_\_\_ Financial Aid Application
- \_\_\_\_\_ School enrollment application
- \_\_\_\_\_ Most recent tax return
- \_\_\_\_\_ Current paycheck or pay stub
- \_\_\_\_\_ Other income statements

**Please include a letter of explanation** for reasons for Financial Aid Assistance. This would be helpful in determining how much assistance the school can give at this point.

Please turn this information into the office.

*If approved for financial aid, you will be expected to volunteer for during the school year. A list of areas for which to volunteer will be available in September.*

<u>Office Use</u>	
Date of interview _____	
Decision made _____	Amount Awarded _____
Amount to be paid each month _____	Date of each month to be paid _____
Approved _____ Date _____	Copy given to applicant _____

The above information will be kept confidential. Be it understood that this form is only a request for assistance. The Principal, a member of the School Board and a Pastor together can only honor requests when reasons for such are justified. The applicant will be notified of acceptance or denial of request.