

Grace Lutheran School  
 Tuition Assistance Fund Application 2023-2024  
 (Application Deadline: May 15th, 2023)

Date \_\_\_\_\_

Parent(s) or Guardian(s): \_\_\_\_\_  
 \_\_\_\_\_

Occupation Father/Guardian: \_\_\_\_\_ Employer: \_\_\_\_\_

Occupation Mother/Guardian: \_\_\_\_\_ Employer: \_\_\_\_\_

Total number of dependent children: \_\_\_\_\_

Name(s) of child(ren) for whom support is being requested:

|      |       |      |       |
|------|-------|------|-------|
| Name | Grade | Name | Grade |
| Name | Grade | Name | Grade |
| Name | Grade | Name | Grade |

*In order to process this application, a copy of your most recent Federal 1040 Tax Form must be enclosed.*

**INCOME STATEMENT** (Indicate **Yearly** Amounts)

|   |                 |          |
|---|-----------------|----------|
| 1) ADJUSTED GROSS INCOME from 2022 IRS 1040, 1040A,<br>or 1040 EZ (include photocopy of tax form)   | Father          | Mother   |
|   | \$ _____        | \$ _____ |
| 2) OTHER INCOME (Income not included in #1 above, Examples<br>include Social Security Benefits, AFDC, Alimony/Child<br>Support, Other Incomes Sources, Rental Income, Other<br>Investments) | \$ _____        | \$ _____ |
| 3) TOTAL ESTIMATED INCOME FOR 2023  | \$ _____        | \$ _____ |
| <b>Combined Total Annual Income</b>   | <b>\$ _____</b> |          |

In the space provided below, you may include any extenuating circumstances or financial hardships of which you would like the financial aid committee to be aware. *(Attach Additional Pages if necessary)*

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STATEMENTS OF AGREEMENTS

- a. The purpose for offering financial aid through tuition rate adjustment is to offer financial support to families with confirmed need. This is to help your children attend Grace Lutheran School to receive a full-time Christian education.
- b. This financial aid is to assist you in your tuition responsibilities and is not meant to remove your obligation.
- c. A submitted application does not guarantee financial aid will be awarded. Financial aid awarded in years past may differ from future allotments.
- d. Each family’s financial situation will be examined individually and confidentially by the Committee, and a determination will be made as to the support paid by the Tuition Assistance Fund and the support paid by the parent(s)/guardian(s).
- e. You must contact the Committee before the end of each semester if changes in your income occur so proper adjustments may be made. Failure to do so may result in withdrawal of financial aid.
- f. Financial Aid forms should be returned to the Committee as soon as possible, and no later than May 15<sup>th</sup>, 2022. Financial Aid grants will be communicated to each applicant family after the Committee completes review.
- g. Any Financial Aid determined will be administered by the Committee on your behalf.
- h. By my/our signature(s) below, I/We certify that all information provided to the Committee during the application process, including on this application and through all resulting dialogue, is accurate, complete, and correct as of the date such information is provided.

I/We understand that the purpose of Christian education is to help our child grow in his/her understanding of God’s Word so that he/she may remain strong in the faith and serve God with a life of Christian service. This education takes place in the school, in the church, and in the home. Out of concern for our spiritual welfare, we will strive to worship together as a family.

I/We have read, understand, and agree with all the above statements.

\_\_\_\_\_  
By (parent/guardian signature)

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

\_\_\_\_\_  
By (parent/guardian signature)

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

\_\_\_\_\_  
Contact Phone Number

\_\_\_\_\_  
Email Address

**Please return completed application along with Federal 1040 Tax form by May 15 to the school office or via email to: [financialaid@grace-wels.net](mailto:financialaid@grace-wels.net)**