

# Christ Lutheran School | Tuition Assistance Application

Name of Student(s) \_\_\_\_\_

Names of Parents \_\_\_\_\_

Address \_\_\_\_\_

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

Occupation of Parents \_\_\_\_\_

Total Tuition Owed \_\_\_\_\_

Amount of Help requested \_\_\_\_\_

Please list the reason(s) for requesting tuition assistance: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*With this form please include a copy of your previous year's tax return.*

Signature of Parents \_\_\_\_\_ Date \_\_\_\_\_

*All information on this form is for Christ Lutheran's Board of Christian Education only, and will be kept strictly confidential.*