

School Year 2021-2022

Community Scholarship Application  
Concordia Lutheran School 4245 Lake Ave., Fort Wayne, IN 46815

Date Request Received \_\_\_\_\_

Name of Applicant (adult) \_\_\_\_\_

Home Address \_\_\_\_\_ Phone \_\_\_\_\_

Church Membership \_\_\_\_\_

Name(s) and Grade(s) of Children attending Concordia Lutheran School

Name _____	Grade _____
Name _____	Grade _____
Name _____	Grade _____
Name _____	Grade _____

Total Tuition/Enrollment Fee for this Family: (to be filled in by school office)  
\$ \_\_\_\_\_

Total number of income producing adults in household: \_\_\_\_\_

Total number of people in household (including children) \_\_\_\_\_

Please check the one that applies

One Box-combined household income is: (attach first page of 2020 Income Taxes form.)

- |   |   |
|---|---|
| <input type="checkbox"/> Below \$10,000 a year                | <input type="checkbox"/> Between \$10,000 and \$20,000 a year |
| <input type="checkbox"/> Between \$20,000 and \$30,000 a year | <input type="checkbox"/> Between \$30,000 and \$40,000 a year |
| <input type="checkbox"/> Between \$40,000 and \$50,000 a year | <input type="checkbox"/> Between \$50,000 and \$60,000 a year |
| <input type="checkbox"/> Over \$60,000 a year                 |   |

Place of employment for adult(s) in household:  
\_\_\_\_\_

Amount you are able to contribute per month to your student's tuition costs? (This amount is not guaranteed to be approved):  
\_\_\_\_\_

Reason financial help is needed (Please write in detail on the back of this paper or attach a separate sheet of paper):  
\_\_\_\_\_

Signature of Applicant(s) \_\_\_\_\_

Administrator's Signature \_\_\_\_\_

Finance Committee: Approved for \$ \_\_\_\_\_ amount

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Reason financial help is needed: