

Jack and Jill Preschool  
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### **Trinity Scholarship Application for Jack and Jill Preschool 2017 - 2018**

Thank you for your interest in the Jack and Jill Preschool (J&J). This scholarship application must be completed in its entirety and returned to J&J by **June 30<sup>th</sup>** for consideration. (the deadline for scholarships can be extended based on available funds)

Scholarships are awarded based on financial, social, and spiritual needs. Scholarship decisions are made by the Hagenbuch Scholarship Committee which is composed of members of Trinity Evangelical Lutheran Church, members of the Jack and Jill Preschool staff, and others who are chosen because of their areas of expertise.

Due to the age of the children who receive the scholarship(s), the names, addresses, and other personal information are kept private and confidential from the rest of the Jack and Jill Preschool Board and from the general public.

Deadline for submission of the Trinity Scholarship application must be returned to Jack and Jill Preschool Director before **June 30<sup>th</sup>**. The application must be complete and include all requested information in order to be considered by the committee.

For the current school year, tuition for the **Primary class** is set at **\$910.00** and the **Prekindergarten class** is set at **\$980.00**. Depending on the family's financial status, all or part of this annual tuition could be covered. Because there can always be extenuating circumstances, the Scholarship Committee will have final say in the awarding and level of scholarships.

***Please keep this top page for your records***

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## Trinity Scholarship Application for Jack and Jill Preschool

This application and all requested information must be completed and returned to the preschool by **June 30<sup>th</sup>**. Failure to provide any and all requested information will make the scholarship application invalid.

### Child's information:

Child's name: \_\_\_\_\_

Child's date of birth: \_\_\_\_\_

Child's primary address: \_\_\_\_\_

Phone number at address where child primarily resides: \_\_\_\_\_

### Maternal information:

Mother's name: \_\_\_\_\_

Mother's address: \_\_\_\_\_

Is this a house or apartment? \_\_\_\_\_

Do you rent or own this dwelling: \_\_\_\_\_

How long have you been living at this address: \_\_\_\_\_

Mother's phone number (home): \_\_\_\_\_

Mother's phone number (cell): \_\_\_\_\_

Mother's email address: \_\_\_\_\_

Mother's employer(s): \_\_\_\_\_

\_\_\_\_\_

Job titles: \_\_\_\_\_

Employer's address (es): \_\_\_\_\_

\_\_\_\_\_

Employer's phone number(s): \_\_\_\_\_

How long have you been employed at this (these) business(es): \_\_\_\_\_

\_\_\_\_\_

I have enclosed a copy of my most current Income Tax return: \_\_\_\_\_

**Paternal information:**

Father's name: \_\_\_\_\_

Father's address: \_\_\_\_\_

Is this a house or apartment: \_\_\_\_\_

Do you rent or own this dwelling: \_\_\_\_\_

How long have you been living at this address: \_\_\_\_\_

Father's phone number (home): \_\_\_\_\_

Father's phone number (cell): \_\_\_\_\_

Father's email address: \_\_\_\_\_

Father's employer(s): \_\_\_\_\_

Job titles: \_\_\_\_\_

Employer's address(es): \_\_\_\_\_

\_\_\_\_\_

Employer's phone number(s): \_\_\_\_\_

How long have you been employed at this (these) business(es): \_\_\_\_\_

\_\_\_\_\_

I have enclosed a copy of my most current income tax form: \_\_\_\_\_

**Home information:**

With whom does this child primarily reside: \_\_\_\_\_

If custody is split, define the days/week or month/year or holidays that the child spends with each parent: \_\_\_\_\_

\_\_\_\_\_

List all others who live at the child's primary address, include their names, ages and relationship to the child: \_\_\_\_\_

\_\_\_\_\_

If the child also lives with the other parent at a separate address, list all others who live at that address when the child is there: \_\_\_\_\_

\_\_\_\_\_

**Social information:**

List all activities in which the child takes part. Example: Sunday school (name church), dance class, soccer, gymnastics, T-ball: \_\_\_\_\_

**Educational support:**

List all educational support services that this child may receive. Example: physical therapy, speech therapy, occupational therapy: \_\_\_\_\_

List the reasons why the child is receiving these support services: \_\_\_\_\_

**Personal information:**

List any and all forms of income, support, federal aid, S.S.I., welfare, food stamps, housing, medical assistance, etc. that this child receives, or that your household receives on behalf of the child: \_\_\_\_\_

List any extraordinary expenses, burdens, etc. that your family is facing that cause financial, emotional, or social distress and would make paying full tuition to Jack and Jill Preschool difficult for the parents of this child: \_\_\_\_\_

**REMEMBER:** Include a copy of all parents' most current income tax return, W-2 forms and all other requested attachments with this application. The scholarship request will NOT be considered without all necessary income verification documents.

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**Requesting party:**

I certify that all information included in this document is true. If at any time prior to the start or during the school year the financial information in this application is found to be false, it will invalidate this application, and I will be responsible for reimbursing Jack and Jill Preschool for any and all scholarship monies to which we were not entitled.

Further; if the financial information as stated in this document is found to be false or misleading, but still at a level where we would qualify for a partial scholarship, I will have the opportunity to keep my child at J&J, but will be responsible for paying the current level of tuition, either in full or in monthly installments.

**Signed:** \_\_\_\_\_

**Relationship to the child listed in this document:** \_\_\_\_\_

**Date Submitted:** \_\_\_\_\_