

GRANT REQUEST

- (A) \$ _____ Enter amount the custodial household can contribute towards the cost of attending Mount Olive
- (B) \$ _____ Enter annual total of other assistance received for your student(s) to attend Mount Olive
- (C) \$ _____ Enter total annual school fee that applies to your family using the table at the bottom of this page
- (D) \$ _____ Enter totals of lines A - B
- (E) \$ _____ Enter total amount of financial assistance requested by subtracting line D from C

FAMILY INFORMATION

Student (child 1) _____ Grade: _____

Student (child 2) _____ Grade: _____

Student (child 3) _____ Grade: _____

Student (child 4) _____ Grade: _____

Street Address _____

City _____ Phone _____

Household Male _____ Employer _____

Household Female _____ Employer _____

Marital Status: Married / Separated / Divorced / Widowed

HOUSEHOLD INCOME INFORMATION

	Actual 2018	Estimated 2019
Adjusted Gross Income from 1040, 1040A, or 1040EZ	_____	_____
Include Federal Tax Form 1040, 1040A, or 1040 EZ	_____	_____
Federal Taxes Paid	_____	_____
Work Income - Male	_____	_____
Work Income - Female	_____	_____
Untaxed Income and Benefits	_____	_____
Child Support (attach any court orders or divorce judgments)	_____	_____

2019-2020 School Fees				
	1st Child	2nd Child	3rd Child	Additional Child
Grades K-8	\$1,745.00	\$1,450.00	\$1,140.00	\$805.00

3K-4K Half Day	2 Days (\$1,280)	3 Days (\$1,690)	5 Days (\$3,175)
3K-4K Full Day	3 Days (2,970)	4 Days (\$3,895)	5 Days (\$4,865)

PARENT INCOME INFORMATION

Describe your job situation as full-time(FT), part-time (PT), seasonal

Enter the gross amount (before ANY deductions) of your current paychecks

Describe the frequency of paychecks, (weekly, bi-weekly, monthly)

	Father	Mother
Describe your job situation as full-time(FT), part-time (PT), seasonal	_____	_____
Enter the gross amount (before ANY deductions) of your current paychecks	_____	_____
Describe the frequency of paychecks, (weekly, bi-weekly, monthly)	_____	_____

PARENT ASSET INFORMATION

As of what date: _____

Savings, Cash and Checking Accounts

Home (Current Market Value)

Unpaid mortgage

Monthly mortgage payment

Business / Farm (Current Market Value)

Unpaid mortgage

Monthly mortgage payment

Other Real Estate (Current Market Value)

Unpaid mortgage

Monthly mortgage payment

Investments / stocks Bond, etc (Current Market Value)

Recreational items (Boat, ATV, Snowmobile, etc.)

List items _____

Voluntary annual contribution to retirement accounts (IRA, 401K, etc.)

Savings, Cash and Checking Accounts	\$ _____
Home (Current Market Value)	\$ _____
Unpaid mortgage	\$ _____
Monthly mortgage payment	\$ _____
Business / Farm (Current Market Value)	\$ _____
Unpaid mortgage	\$ _____
Monthly mortgage payment	\$ _____
Other Real Estate (Current Market Value)	\$ _____
Unpaid mortgage	\$ _____
Monthly mortgage payment	\$ _____
Investments / stocks Bond, etc (Current Market Value)	\$ _____
Recreational items (Boat, ATV, Snowmobile, etc.)	\$ _____
Voluntary annual contribution to retirement accounts (IRA, 401K, etc.)	\$ _____

DEPENDENTS

List dependents other than Mount Olive Students:

Name	School	High School / College costs paid by you
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SPECIAL CIRCUMSTANCES

If there are any special circumstances the committee should be aware of in considering this application, please write a letter and attach it to this application (Examples: Current employment, Medical Issues, Divorce, Church Attendance, Volunteer Church or School Activities, Financial Support to Congregation)

Applicant(s) Signature(s) _____ Date _____
 _____ Date _____

Return completed form no later than April 20, 2018 to the Treasurer of the Board of Christian Education:
 Mount Olive Lutheran School, Attn: Jeff Schultz, 930 East Florida Avenue, Appleton, WI 54911,
 education@mountoliveappleton.com