

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 2017	Estimated 2018
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)	_____	_____

2018-2019 School Fees				
	1st Child	2nd Child	3rd Child	Additional
Grades K-8	\$1,660.00	\$1,380.00	\$1,085.00	\$770.00

3K-4K Half Day (8:00 – 11:15)	2 Days (\$1250)	3 Days (\$1650)	5 Days (\$3100)
3K-4K Full Day (8:00 – 3:00)	3 Days (\$2900)	4 Days (\$3800)	5 Days (\$4750)

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

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.)

\$ _____

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 May 15, 2018 to the Treasurer of the Board of Christian Education:

Mount Olive Lutheran School, Attn: Jeff Schultz, 930 E Florida Ave, Appleton, WI 54911,
education@mountoliveappleton.com