



Mt. Calvary Lutheran Preschool

# Mt. Calvary Lutheran Preschool

1372 W. Fremont St.

Galesburg, IL 61401

Ph: 309-342-7083

E-mail: [preschool@mclcgalesburg.org](mailto:preschool@mclcgalesburg.org)

Website: [www.mclcgalesburg.org](http://www.mclcgalesburg.org)

## Application for Tuition Grant

Parent/Guardian(s) – **Please return this completed application along with copies of your most recent 1040 Tax forms (or copies of your last month’s income if you do not file taxes)** in sealed envelope in care of the Board of Education to the Preschool office prior to September 16, 2024. The Board of Education will meet, review applications, and award partial scholarships as funds allow. **Parents must pay the registration fee and the full September tuition in order to be considered for a scholarship.** Scholarship funds awarded will be divided equally and applied towards monthly tuition for the remainder of the school year (October – May). Tuition grants are given on an annual basis and a new application must be prepared and submitted each year.

List student(s) for whom application is being made:

Name	Birth date	Class enrolled in (2-day, 3-day, or 5-day)

	Biological Mother	Biological Father
Name		
Street Address		
City, State Zip		
Home Phone		
Cell Phone		
Marital Status:		
Child lives with:		
List additional household members and ages:		

Continued....	Biological Mother	Biological Father
<b>Employed at:</b>		
<b>Job Title:</b>		
<b>Monthly gross income:</b>		
<b>Additional gross monthly income:</b> (second job, rental, child support, social security, disability, etc.)		
<b>Additional Household gross income:</b> (List income from anyone else living in same house)		
<b>List <u>all</u> outstanding loans and monthly payment:</b> (mortgage, auto, student loans, etc.)		
<b>List <u>all</u> credit cards/charge accounts and min. monthly payments:</b>		
<b>Do you own/rent home?</b>		
<b>List all monthly family entertainment/children's activities:</b> (lessons, YMCA, etc.)		

Continued....	Biological Mother	Biological Father
<b>Do you have outstanding medical bills? If yes, please list.</b>		
<b>Church Family Attends:</b>		
<b>Do you attend regularly?</b>		
<b>Are you a member?</b>		
<b>Is child baptized?</b>		
<b>Would you be interested in more information on our church?</b>		
<b>Would you like a visit from our Pastor?</b>		

**Why do you wish to obtain a Christian/private education for your child? Please include a comment on the efforts you make at home to demonstrate religious support.**

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**What other information would you like the board to consider?**

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**We believe this form to be complete and correct to the best of our knowledge.**

\_\_\_\_\_  
**Mother's Signature**

\_\_\_\_\_  
**Father's Signature**

\_\_\_\_\_  
**Date**