

FINANCIAL AID FORM

Any student receiving financial assistance from Saint Paul Lutheran High School must complete this. Students participating in the tuition waiver program do not need to complete this form. **Deadline is June 1, 2010.**

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Student's Name _____ Telephone # _____

Parent's Name _____

Address _____

Parent's Marital Status: Married ____ Single ____ Age of Older Parent _____

Student's Grade _____ U.S. Citizen Yes ____ No ____

Resident Student ____ Commuting Student ____ Male ____ Female ____

Congregation where student is a member _____

The student is interested in preparing to serve the LCMS as:

Pastor __ Teacher __ DCE __ Deaconess __ Other (specify) _____

Number of Members in Household ____ Number attending college (10-11) _____

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Form Filed: 1040A or 1040EZ ____ 1040 ____ Did not file _____

Adjusted Gross Income 2009 _____

Federal Income Tax Paid 2009 _____

1st Parent's Anticipated Total Income (2010) _____

2nd Parent's Anticipated Total Income (2010) _____

Student Form Filed: 1040A or 1040EZ ____ 1040 ____ Did not file _____

Student's Adjusted Income 2009 _____

Student's Income Tax Paid 2009 _____

Parent's Savings _____ Student's Savings _____

Value of Home _____ Mortgage _____

Value of Farm _____ Mortgage _____

Value of Business _____ Mortgage _____

Value of Other Investments _____ Mortgage _____

Monthly Social Security Benefits _____ These will be received for how many more months? _____ SS Benefits received for other children _____

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The above facts are true to the best of understanding.

Signature of Parent(s) _____ Date _____

Signature of Student _____ Date _____

Please return this form to: Director of Financial Aid
Saint Paul Lutheran High School
P. O. Box 719
Concordia, MO 64020