

SJSJ Financial Aid Request Form

2024-2025

St. John – St. James Lutheran Church and School is committed to the principle that no student should be denied a Christian education on financial grounds. Through the generosity of our members and our SCRIP program, we are able to offer this financial aid to families who are in need of assistance in paying their school registration fees.

Guidelines for the 2024-2025 School Year:

1. The amount of financial aid given is left to the discretion of the Christian Education Committee (CEC).
2. The financial aid request can only be for the upcoming or current school year.
- 3. To be eligible for financial aid, a family must have their registration fees, hot lunch, etc. paid in full from any previous year. A family is not eligible for current funds until their previous school year balance is paid in full.***
4. Funds will be distributed at the beginning of the school year. The amount of aid will always depend on the amount that is in the fund from year to year as well as the needs of the families that apply.
5. The financial aid application **must be accompanied by a copy of your Federal 1040 Tax Form (Self-employed attach Schedule C or F).**
6. **Applications must be submitted by August 5, 2024. Applications should be placed in a sealed envelope marked "Financial Aid Request Form" and returned or mailed to the church/school office.**
7. **All applicants must complete the attached application form in its entirety.**
8. **The final decision to award financial aid will be made at the August CEC meeting and the family will be notified.**

If you have any questions about the financial aid, including the application process, please contact Mr. Zimmerman.

SJSJ Financial Aid Application

***All information is 100% confidential and will only be viewed by the CEC.

Parent(s) Name(s): _____

Address: _____

Phone numbers: (home) _____ (cell) _____

Email address: _____

Father's Employer _____

Current Job Status (full time, part time, laid off, unemployed) _____

Mother's Employer _____

Current Job Status (full time, part time, laid off, unemployed) _____

Please list the name(s) and the grade(s) of your child(ren) attending St. John – St. James Lutheran School in the next school year.

Student's Name	Grade (next school year)
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

Total Number of Dependents: _____

Please explain any special circumstances that you wish to share with the CEC that have created a financial need for your family.

Applicant Signature: _____ **Date:** _____
