Application for Financial Aid Prentiss Christian School

Address: Street & Number City State Zip	Name:				Age _	
Birthplace: Date of Birth: :	Last					
Birthplace:	Address:Street & Number		City	State	Zir	······································
Sex:Nationality:Race					•	
Current Academic Average: List below strongest academic subject List honors student has received: List activities student participates in: (athletics, band, show choir, clubs, etc.): Parent or Guardian of Applicant: Address: Street & Number City State Zip Phone Occupation of Parents or Guardians: Name of Employer (Father): Address of Employer: Street & Number or P.O City State Telephone Number Name of Employer (Mother): Address of Employer: Street & Number or P.O City State Telephone Number Last Yearly Income of Parents or Guardians: (Please attach your lastincome tax return)				Month	Day	Year
Current Academic Average: List below strongest academic subject List honors student has received: List activities student participates in: (athletics, band, show choir, clubs, etc.): Parent or Guardian of Applicant: Address: Street & Number City State Zip Phone Occupation of Parents or Guardians: Name of Employer (Father): Address of Employer: Street & Number or P.O City State Telephone Number Name of Employer (Mother): Address of Employer:	Sex: Nationality:	Race	;			
List honors student has received: List activities student participates in: (athletics, band, show choir, clubs, etc.): Parent or Guardian of Applicant: Address: Street & Number City State Zip Phone Occupation of Parents or Guardians: Name of Employer (Father): Address of Employer: Street & Number or P.O. City State Telephone Number Name of Employer (Mother): Address of Employer: Street & Number or P.O. City State Telephone Number Last Yearly Income of Parents or Guardians: (Please attach your last income tax return)	School Currently Attending:			Gra	ade	
List activities student participates in: (athletics, band, show choir, clubs, etc.): Parent or Guardian of Applicant: Address: Street & Number City State Zip Phone Occupation of Parents or Guardians: Name of Employer (Father): Address of Employer: Street & Number or P.O. Telephone Number Name of Employer (Mother): Address of Employer: Street & Number or P.O. Telephone Number City State Telephone Number Last Yearly Income of Parents or Guardians: (Please attach your last income tax return)	Current Academic Average: _	List!	below strongest a	academio	e subje	cts:
Parent or Guardian of Applicant: Address: Street & Number City State Zip Phone Occupation of Parents or Guardians: Name of Employer (Father): Address of Employer: Street & Number or P.O. City State Telephone Number Name of Employer (Mother): Address of Employer: Street & Number or P.O. City State Telephone Number Last Yearly Income of Parents or Guardians: (Please attach your last income tax return)	List honors student has receive	ed:				
Address: Street & Number City State Zip Phone Occupation of Parents or Guardians: Name of Employer (Father): Address of Employer: Street & Number or P.O. Telephone Number Name of Employer (Mother): Address of Employer: Street & Number or P.O. Telephone Number City State Telephone Number Last Yearly Income of Parents or Guardians: (Please attach your last income tax return)	List activities student participa	ates in: (athletics, b	and, show choir,	clubs, e	tc.):	
Address of Employer: Street & Number or P.O. Telephone Number Name of Employer (Mother): Address of Employer: Street & Number or P.O. Street & Number or P.O. Telephone Number City State Telephone Number Last Yearly Income of Parents or Guardians: income tax return	Address:Street &	& Number City	State	Zip		
Address of Employer: Street & Number or P.O. Telephone Number Name of Employer (Mother): Address of Employer: Street & Number or P.O. Telephone Number City State City State Telephone Number Last Yearly Income of Parents or Guardians: (Please attach your last income tax return)	Name of Employer (Father):					
Name of Employer (Mother): Address of Employer: Street & Number or P.O. Telephone Number Last Yearly Income of Parents or Guardians: (Please attach your last income tax return)					State	7in
Name of Employer (Mother): Address of Employer: Street & Number or P.O. Telephone Number Last Yearly Income of Parents or Guardians: (Please attach your last income tax return)			——— City		State	Zip
Address of Employer: Street & Number or P.O. Telephone Number Last Yearly Income of Parents or Guardians: (Please attach your last income tax return)	Name of Employer (Mother):					
Last Yearly Income of Parents or Guardians: (Please attach your last income tax return)	± • ·				G	7.
Last Yearly Income of Parents or Guardians: (Please attach your last income tax return)			— City		State	Zip
	Last Yearly Income of Parents	(<u>Pleaso</u>	(Please attach your last			
If congreted or diverged does this perent contribute to support? How Much?	income tax return)					
If separated or divorced, does this parent contribute to support? How Much?	If separated or divorced, does	this parent contribu	ite to support?	How	Much	?
Number of Children in Family: Ages:	•	-	-			

PLEASE REVIEW OUR MINORITY TUITION SCHOLARSHIP PROGRAM FOR ADDITIONAL ITEMS WHICH MUST BE SUBMITTED WITH THIS APPLICATION.

Prentiss Christian School admits students of any race, color, national origin, and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national origin, and ethnic origin in administration of its educational policies, admission policies, scholarship programs and athletic and other school-administered programs.