

First Christian Church Preschool Scholarship Program Application 2021-2022

Carefully complete this application. Sign and return this form with your 2020 W-2 Wage and Tax Statement or two consecutive paystubs, or the first page of your completed 2020 taxes.

Student Name: _____

Student Birthdate: _____

Parent/Guardian(s) _____

Street Address: _____

City, State, Zip Code: _____

Home Phone: _____ Work Phone: _____

Email: _____

List the names of ALL persons living in your home:

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

TOTAL HOUSEHOLD INCOME: _____ (weekly, monthly, or yearly)

Singnature: _____ Date: _____