



St. Paul Lutheran School

31 Washington Ave. Batavia, New York 14020

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TUITION ASSISTANCE APPLICATION

1. Children's Names (please list all dependent children in family):

LAST

FIRST

AGE

GRADE IN SCHOOL

2. Household Income: * Names of all adults in household and their occupation

Gross income per last year's 1040 Tax form(s) filed: _____

Estimated gross income for current year: _____

Please estimate the amount of tuition you feel you can pay: \$ _____

Provide any additional information you feel will help us in our consideration of your need for tuition assistance.

3. Signature (an adult household member **must** sign the application before it can be considered).

I certify that all the above information is true and correct and that all income is reported. I understand that this information is being given for the receipt of scholarship funds; that school officials may verify the information on the application and the misrepresentation may negate the application.

Signature: _____ Date: _____

OFFICE USE ONLY

Total amount family owes: _____

Approved in the amount of \$ _____

Not Approved (reason): _____