Contact Information Student First/Last Name



Scholarship Application

2023-2024

Submission of scholarship requests are preferred prior to each school year to allow for time to evaluate the need and budget. However, applications may also be accepted at any time at the discretion of the Preschool Board.

Requests for more than 50% of tuition per month/year will require an interview with the Trinity Lutheran Preschool Board President, Scholarship Member and/or the Director/Head Teacher.

Session for 2023-24 (MWF or T/TH)

Recipients are strongly encouraged to participate in Trinity Lutheran Preschool fundraising efforts.

Parent/Guardian First/Last Name	
Home Address/City/State/Zip	
Primary Email	
Primary Phone Number	
*Are you a member of Trinity Lutheran Church paris	sh? Yes or No
*Please note, TLC membership does not affect ability to receive sch	nolarship assistance.
Applicant Information	
Reason(s) my family is seeking preschool educa by Trinity Lutheran Preschool:	ation that includes Christian instruction provided

Reason(s) my family is requesting tuition assistance:	
My family can contribute a minimum of \$ per year/month (please circle) towards tuition costs.	
My family requests a scholarship of \$ per year/month (please circle) to fulfill tuition requirements.	
Signature	
This signed form represents our family's application for a Trinity Lutheran Preschool scholarship.	
I understand this form is confidential and will be kept on file.	
I understand financial assistance will be awarded based on the number of applicants and available funds, and that submitting this application is not a guarantee of assistance.	
Parent/Guardian Name: Date:	
Parent/Guardian Name: Date:	

 $Please \ send \ completed \ form \ to \ Trinity \ Luther an \ Preschool \ at \ the \ mailing \ address \ provided \ or \ via \ email \ to \ \textbf{preschool} \ \textbf{@tlcmadison.com}.$