

Luther North College Prep

Family Request for Scholarship/Financial Aid

2013-2014

Student Information

Student Name: _____

Address: _____ City: _____ State: ____ Zip: _____

Student Year in 2013-14: FR ____ SO ____ JR ____ SR ____

Student's Cumulative G.P.A. at the end of the most recent grading period: _____

Name of grade school that you graduated from: _____

Name of Church that you attend: _____

Parent/Guardian Information

Father's Name: _____

Mother's Name: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Home Phone: _____

Home Phone: _____

Work Phone: _____

Work Phone: _____

Occupation: _____

Occupation: _____

Employer: _____

Employer: _____

Alumni of Luther North _____

Alumni of Luther North _____

Who is responsible for Tuition Payments?

Alternate Funding

If you will be receiving Financial Aid from outside sources, please list the amount you will be receiving for the 2013-14 school year:

Name of Organization: _____ Amount \$ _____

Name of Congregation: _____ Amount \$ _____

Name of Sponsor/Donor _____ Amount \$ _____

Financial Aid Checklist

Please Check All Grants and Scholarships you are applying for:

Freshman Scholarship	___	Multiple Sibling	___
Board of Trustee Scholarship	___	Legacy Grant	___
Servant-Talent-Leadership	___	Lutheran Staff Discount	___
Class Valedictorian	___	Clergy Discount	___
Class Salutatorian	___	Cross Star Grant in Aid	___
Luther Singers	___	Sharing the Opportunity	___
Jazz Band	___	Pre-Payment Credits	___
Drama	___	Congregational	___
Fine Arts Academy Scholarship	___	CLEF	___
Business Academy Scholarship	___	Len-Rich Scholarship	___
Health Science Academy Scholarship	___		
Lutheran School Graduate	___		
Other Christian School Graduate	___		

Special Circumstances:

Please make us aware of any extraordinary circumstance in your request. If needed, please attach extra sheets with this information

Signatures:

We the undersigned certify that all information presented here for the purpose of obtaining financial aid is true to the best of our knowledge.

Signature of Father, Stepfather or Male Guardian: _____

Signature of Mother, Stepmother, or Female Guardian: _____

Signature of Student: _____ **Date:** _____

Please return this form to the Luther North Main Office, along with your completed Smart Tuition Enrollment Form, Luther North Tuition Contract, and Registration Fee.