Genesis Christian School Scholarship Application

Section 1: Applicant and Co-Applicant Information

(Section I and Section II must be completed by both parents)

olicant Information: Parent Name			
Social Security #	Date of Birth		
Mailing Address			
City	State	Zip	
Daytime Phone #	Evening Phor	ne #	
E-mail address			
Current Marital Status			
Place of Employment	Relation	onship to Studer	nt
Occupation	Employer		
Place of Worship			
!			
Religious Affiliation			
Religious Affiliation -Application Information: P Name Social Security # Mailing Address	Parent or Guardian (Th	is must be complete	ed by both
Religious Affiliation -Application Information: P Name Social Security # Mailing Address City	Parent or Guardian (Th	is must be complete	ed by both
Religious Affiliation -Application Information: P Name Social Security # Mailing Address	Parent or Guardian (Th	is must be complete	ed by both
Religious Affiliation -Application Information: P Name Social Security # Mailing Address City	Parent or Guardian (The Date of Birth State Evening Phore	is must be complete	ed by both
Religious AffiliationApplication Information: P Name Social Security # Mailing Address City Daytime Phone #	Parent or Guardian (Th	is must be complete	ed by both
Religious AffiliationApplication Information: P Name Social Security # Mailing Address City Daytime Phone # E-mail address	Parent or Guardian (Th	is must be complete	ed by both
Religious Affiliation -Application Information: P Name Social Security # Mailing Address City Daytime Phone # E-mail address Current Marital Status	Parent or Guardian (The Date of Birth State Evening Phor	is must be complete	ed by both

Religious Affiliation

Section 2: Student and School Information

Child's N	lame			
Child's S	ocial Security No		_ Date	of Birth
Child's N	lame			
Child's S	ocial Security No		Date	of birth
Child's N	lame			
Child's S	ocial Security No		Date	of birth
Child's N	lame			
Child's S	ocial Security No		Date	of birth
	pplicant and Co-App			
on 3: Ap	oplicant and Co-Apport	plicant Incom	e Inforn	nation ehold
on 3: Ap	oplicant and Co-Apport	plicant Incom of adults living in f children living i	e Inforn this hous n this hou	nation ehold usehold
1. Size of 2. Do y	oplicant and Co-App of household: Number o Number o	olicant Incom of adults living in f children living i tax return?	e Inforn this hous n this hou	nation ehold usehold
1. Size of 2. Do y 3. Does	oplicant and Co-App of household: Number o Number o ou file a federal income	olicant Incom of adults living in f children living i tax return?	e Inforn this hous n this hou tax return	nation ehold usehold n?
1. Size of 2. Do y 3. Does Taxable 4. Plea	oplicant and Co-App of household: Number of Number of ou file a federal income of the co-applicant file and Income: (Page 1 of your 1 se list the "Adjusted Gross	olicant Incom of adults living in f children living i tax return? federal income	e Inform this house this house tax return	nation ehold usehold n? bmitted with your applic
1. Size of 2. Do y 3. Does Taxable 4. Plear return 5. Whe appl	oplicant and Co-App of household: Number of Nu	olicant Incom of adults living in f children living i tax return? federal income of adults living in tax return? federal income form me as Income" from ately, list the "Aceral tax return.	e Inform this house this house tax return tast be such the apple	nation ehold usehold n? bmitted with your applications is most recent feet
1. Size of 2. Do y 3. Does Taxable 4. Pleat retur 5. Whe appl 6. Do y	oplicant and Co-App of household: Number of Number (Page 1 of your 1) are list the "Adjusted Gross of Number of Numb	olicant Incom of adults living in f children living i tax return? federal income of adults living in tax return? federal income form me as Income" from ately, list the "Aceral tax return.	e Inform this house n this house tax return tax teturn the appl djusted G	nation ehold usehold n? bmitted with your application of the second from the second from the gross Income" from the
1. Size of 2. Do y 3. Does Taxable 4. Pleating retur 5. Whe appl 6. Do y a. Bus	oplicant and Co-App of household: Number of Nu	olicant Incom of adults living in f children living i tax return? federal income of adults living in tax return? federal income form me as Income" from ately, list the "Aceral tax return.	e Inform this house In this house tax return tax return the apple djusted G	nation ehold usehold n? bmitted with your application and the second from the
1. Size of 2. Do y 3. Does Taxable 4. Pleating retur 5. Whe appl 6. Do y a. Buston Fair	oplicant and Co-App of household: Number of Nu	olicant Incom of adults living in f children living i tax return? federal income of adults living in tax return? federal income form me as Income" from ately, list the "Aceral tax return.	e Inform this house n this house tax return tax teturn the appl djusted G	nation ehold usehold n? bmitted with your application of the second from the second from the gross Income" from the
1. Size of 2. Do y 3. Does Taxable 4. Plear retur 5. Whe appl 6. Do y a. Bus b. Far d. S C	oplicant and Co-App of household: Number of Number (Page 1 of your 1) are list the "Adjusted Gross of Number of Numb	olicant Incom of adults living in f children living i tax return? federal income of adults living in tax return? federal income form me as Income" from ately, list the "Aceral tax return.	e Inform this house n this house tax return tax return the appl djusted G Yes Yes	nation ehold usehold n? bmitted with your application and the second from the second second from the second sec

7. Child support received	W	Μ	Α	\$	
8. Social Security benefits that were not taxed	W	М	Α	\$	
9. Temporary Assistance for Needy Families	W	М	Α	\$	
10. AFDC or ADC	W	М	Α	\$	
11. Food stamps	W	М	Α	\$	
12. Tuition support from family/friends/employer	W	М	Α	\$	
13. Worker's Compensation	W	М	Α	\$	
14. Other non-taxable income	W	М	Α	\$	
Change of Income:					
How much do you estimate your and/or your spoutuition monthly? \$. ,	oward th —	nis child(s)	
(This application is for tuition only, the registration of the applicant. These fees will not be included in the completed before your application can be review	ne scho				
Applicant Signature		Date			
Co-Applicant Signature		Date			

Nontaxable Income: (Indicate if it is received weekly, monthly, or annually)