



SCHOLARSHIP AWARD APPLICATION FORM

1. Complete the application below for each student applying for an SGO Scholarship.
2. Include Page 1 of most recent Federal Income Tax Return (Form 1040). (Your financial information will only be shared with those responsible for making a decision with regards to an award.)
3. Submit this Application and Page 1 of your Form 1040 to the Royal Redeemer Lutheran School Office: **school@royred.org**.

Please Note: Any scholarship distributions will be sent directly to the enrolling school to apply to your account.

Student First Name: _____

Student Last Name: _____

Student Date of Birth: _____

Name of school: **ROYAL REDEEMER LUTHERAN SCHOOL** School Year: **2023/24** School Grade: _____

Total number of adults and children in your household: _____

Name of Primary Parent/Guardian: _____

Name of Secondary Parent/Guardian (if applicable): _____

Home Address: _____

City: _____ State: _____ Zip: _____

Signature Parent/Guardian: _____

FOR SCHOOL USE ONLY

Proof of Income Received: Yes or No (Circle)

Proposed Award

Household Size: _____

Tuition: _____

Household Income: _____

Fees: _____

% of Poverty Threshold: _____

Total: _____

Sign Off (Initials): Committee Member 1 _____ Member 2 _____ Member 3 _____