



**Copies of 2019 Federal Form 1040 for ALL household members with income must accompany this form.**

\*If a tax return is not available or does not provide an accurate picture of total household income, please report other income in Section C.

**Section A - Trinity Lutheran Students Applying:**

Name First and Last	2020- 2021 Grade	Public School would attend	School Attended 2019-2020	Individual Education Plan (IEP)		Prior TLC Scholarship			Prior Indiana Choice Scholarship			Prior SGO Scholarship		
				Yes	No	No	Self	Sibling	No	Self	Sibling	No	Self	Sibling
1.				Yes	No	No	Self	Sibling	No	Self	Sibling	No	Self	Sibling
2.				Yes	No	No	Self	Sibling	No	Self	Sibling	No	Self	Sibling
3.				Yes	No	No	Self	Sibling	No	Self	Sibling	No	Self	Sibling
4.				Yes	No	No	Self	Sibling	No	Self	Sibling	No	Self	Sibling
5.				Yes	No	No	Self	Sibling	No	Self	Sibling	No	Self	Sibling

Primary Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Community School District (choose one:) Concord Elkhart Middlebury Mishawaka

PHM South Bend Other \_\_\_\_\_

**Section B - Children Living in Household:**

Name (First & Last)	Child's Annual Income (If any)	Dependent on provided tax return? (Select One, If no please explain)
1.		Yes No
2.		Yes No
3.		Yes No
4.		Yes No

**Section C - ALL Adult Household Members: - Annual Income**

Name (First & Last)	Earnings From work	Public Assistance/ Child Support/ Alimony	Pensions/ Retirement/ All Other Income	Listed on Provided Tax Return (Select One, If no please explain)
1.				Yes No
2.				Yes No
3.				Yes No
4.				Yes No

**Section D - Verification**

All Federal Form 1040s are enclosed? Yes No (If no, please explain) \_\_\_\_\_

Does Form 1040 provide an accurate picture of total household income? Yes No

If No, please provide documentation. Examples include, Unemployment compensation statement, form 1099's, etc...

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*The students in this application are enrolled at Trinity Lutheran School for the 2020-21 school year. I understand that I am required to disclose ALL household members' financial information for the consideration of scholarships. I certify that all of the provided information is true and complete as stated.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_