

## Jack Boerema Scholarship Application

Parents Names:

Address:

Phone Number:

E-mail:

Church Affiliation:

Name of Child to Whom This Scholarship Applies:

Other children names/ages:

**Please submit a complete copy of your prior year tax return.**

Please describe any changes in your income since the filing of your prior year tax return (i.e. loss of job, increase/decrease in wages)

Please list any other sources of income not shown on tax return (i.e. child support, etc.)

Have you sought financial assistance from other sources? (i.e. family ,church, DCS tuition assistance, other?)

Yes No

If yes, how much assistance have you received and whom are you receiving it from?

How much assistance do you need?

I understand that conditions for receiving this scholarship include writing a thank you letter to the donor(s). I also acknowledge that the information contained in this form is correct to the best of my knowledge.

Signed—Father Date

Signed—Mother Date

*NOTE: This form must be submitted to the DCS North Campus office by April 15. Final determination may be made prior to May 31.*