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 in the Please describe any changes in your income since the filing of your prior year.		rease/decrease in wages)
Please list any other sources of income not shown on tax return (i.e. c	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 rec	ceiving it from?	
How much assistance do you need?		_ _
I understand that conditions for receiving this scholarship also acknowledge that the information contained in this fo		
Signed—Father	Date	
Signed—Mother	Date	

NOTE: This form must be submitted to Dutton Christian Middle School office by April 13. Final determination may be made prior to May 31.