## Learning Tree Preschool Love-a-Child Scholarship Application

Please complete, sign, and return this application with the following:

- 1. First page of your most recently completed Income Tax Form for each person in the household
- 2. Copies of the 2 most recent paystubs for each person in the household

First & last names of ALL PERSONS	Total gross household earnings	Total public assistance: TANF, Food	Total pensions, retirement, SSI, Social Security,	Total Child Support or Alimony	All other income received by this individual
Cell phone #	Othe	r phone number			home/work/cel
Street address		Cit	CityZipcode		ode
Parent/Guardian(s)					
Check any aids you receive	TANFFoo	od Stamps	SSI D	oisability	HUD
Has this child received an LTP scho				•	
is this child already registered at L	TP? YES _	NO If	YES, which LTP cla	ss?	
Student Name			Student Bir	thdate	//

First & last names of ALL PERSONS living in your home	Total gross household earnings (MONTHLY)	Total public assistance: TANF, Food Stamps, HUD (MONTHLY)	Total pensions, retirement, SSI, Social Security, Disability (MONTHLY)	Total Child Support or Alimony (MONTHLY)	All other income received by this individual (MONTHLY)
1.	\$	\$	\$	\$	\$
2.	\$	\$	\$	\$	\$
3.	\$	\$	\$	\$	\$
4.	\$	\$	\$	\$	\$
5.	\$	\$	\$	\$ .	\$
6.	\$	\$	\$	\$	\$

List any individuals outside of the household who will be paying a portion of this student's tuition (aunt/uncle, grandparent, parent who does not live in the same home as student because of divorce or separation, family friend, etc.). Please list amount of financial assistance paid toward tuition for each person below.

Name	Relationship to Student	Amount of assistance toward tuition		
1.		\$		
2.		\$		

I certify that all of the above information is true and correct. All income is reported for all persons living in my home and the TANF/Food Stamps/SSI/Disability/HUD is reported correctly. I understand this information is being given for the approval of financial assistance and that school officials may verify the information on this form.

Signature of Adult Household Member: Parent/Guardian

Date Signed

## THIS FORM WILL NOT BE ACCEPTED WITHOUT TAX AND INCOME DOCUMENTATION

Return this completed scholarship application to the preschool office. All information submitted will be kept confidential. If you have questions, please contact Learning Tree Preschool at (812)378-2825.