1700 Woodward S.E.



Grand Rapids, MI 49506

## APPLICATION FOR NEED-BASED FINANCIAL ASSISTANCE 2021-2022 SCHOOL YEAR

Child's Name:			
Parent(s) Name:			
Address:			
E-mail Contact			
Telephone:			
The following information determining assistance ne	eds.	•	•
Father's Occupation:			
Father's Place of Employ	ment:		
Business Address:			
Mother's Occupation:			
Mother's Place of Employ	ment:		
Mother's Business Addre	ss:		
Number of Children in family:		_ Marital Status:	
Income Level Yearly:	under \$10,000	\$10,000-\$15,000	\$15,000-\$20,000
\$20,000-\$25,000	\$25,000-\$35,000	\$35,000-\$45,000	over \$45,000

Is there anyone else who contributes to the household income? YES NO If YES, please explain.
Please list your monthly expenses, i.e. rent/mortgage, car payments, loan payments, etc.
Describe briefly any special circumstances in your family which necessitate your requesting financial aid.
Check whether your child will attend school:2 days/wk3 days/wk4 days/wk
Is your child attending any other preschool or daycare? If so, describe.
Scholarships are granted as an outright gift. This fund is financed solely by contributions. We
ask that if you are able in the future to contribute money to the Eastminster Preschool Scholarship Fund, you will consider making a gift so that others may receive the same benefit.
Please indicate how many dollars per month you need to meet tuition: per month.
Are you a member of Eastminster Presbyterian Church? YES NO
Signature:
Date: