

Scholarship Request Form

Please fill out the information below and give a brief note explaining your hardship. For lower school students, please return this form to the lower school DCO. For upper school students, please return this form to the upper school DCO. If you have students in both upper and lower school, please fill out two separate forms. The DCO will email you back in a timely manner.

Parent Guardian Information:

First Name: _____ Last Name: _____

Email: _____ Phone Number: _____

Student Information: Please list all children for which you are requesting a scholarship.

First and Last Names of Children:

Grade:

First and Last Names of Children:	Grade:

Give a brief description of your hardship:

Parent Print: _____

Parent Sign: _____

Parent Date: _____

For Office Use Only

Eligible: YES/NO

Date determined: _____ Determined by: _____