



Polsky Religious School

SCHOLARSHIP APPLICATION 2021-2022

Dear Parents and Scholarship Applicants:

One of the most endearing aspects of Beth Shalom Synagogue is the continued provision by many of its members for future generations. Contributions made for the benefit of our youth are accumulated in the Permanent Scholarship Fund, and the income from the invested fund is available for scholarships. These scholarships are allocated in the form of grants, and are given on the basis of financial need.

Please read this application thoroughly. It must be filled out **COMPLETELY** and signed by a parent. No application can be considered if not completed in full. Scholarships are only granted to those families who are in good financial standing with Congregation Beth Shalom or have made approved arrangements with the Congregation. Part of the approved arrangement will be your agreement to pay a portion of the tuition fees through a monthly draft of your bank account or charge to your credit card for an agreed upon sum.

Please return the completed application to Trinity Lawson (Polsky Religious School, attn: Trinity Lawson, 14200 Lamar Ave, OP KS 66223) along **with a copy of your most recent 1040 with all schedules attached.**

All applications will be kept in strict confidence.

NO APPLICATION WILL BE CONSIDERED UNLESS ALL ITEMS HAVE BEEN COMPLETED. WHEN AN ITEM DOES NOT APPLY, PLEASE PRINT "DOES NOT APPLY".

STUDENT INFORMATION

NAME _____
 Last Name First Name Middle Name

DATE OF BIRTH _____ AGE LAST BIRTHDAY _____
 Day Mo. Year

Gender: _____ Male _ _____ Female

HOME ADDRESS _____
 Number and Street

City State Zip

TELEPHONE NUMBER _____

EMAIL ADDRESS _____

With whom does student live?

Both Parents _____ Mother _____ Father _____

Other (Specify) _____

Who assumes responsibility for the payment of tuition and other school fees?

PARENT INFORMATION

FATHER OR GUARDIAN

Name _____ Age _____

Home Address

Home Phone _____

Name of Employer _____

Profession _____

Business Address

Income & Expense Information

Income from all sources:

Salaries & Wages: _____

Investment Income (Interest & Dividends): _____

Other Income: _____

Special Expenses or Payment Obligations the Committee should be aware of:

MOTHER OR GUARDIAN

Name _____ Age _____

Home Address

Home Phone _____

Name of Employer _____

Profession _____

Business Address

Income & Expense Information

Income from all sources:

Salaries & Wages: _____

Investment Income (Interest & Dividends): _____

Other Income: _____

Special Expenses or Payment Obligations the Committee should be aware of:

OTHER INFORMATION

Please list all children in family, including applicant:

NAME	SCHOOL	AGE

During the last four years, have any children in the family received, or are they now receiving any scholarship aid whatsoever? _____ If yes, please give full details including the dollar amount of aid and person or institution granting the scholarship.

Please list any other persons receiving financial support from the family.

Name _____ Age _____

Relation to Applicant _____

Amount of total annual support from the family \$ _____

Total amount of financial aid from other sources received for the other children \$ _____

Are you currently applying for or receiving any other aid for this student or any other aid from other children? _____ If so, whom and where?

Please explain any circumstances of which the Committee should be aware in considering your application

In place of a tuition grant, will you sign a non-interest-bearing promissory note which could be repaid over a period of years or in a lump sum?

Yes _____ No _____

THIS APPLICATION CANNOT BE PROCESSED UNLESS THIS SECTION IS COMPLETED IN FULL & YOUR MOST RECENT 1040 IS ATTACHED.

Total Tuition \$ _____

Application is hereby made for a grant in the amount of \$ _____

Balance of fees to be paid by the family \$ _____

Signature of Parent or Guardian

Signature

Date