



Community Scholarship Application



Application due date June 1st

Student Name: _____ Current Grade: _____

Father's Address: _____

Phone Number: _____ Email: _____

Occupation: _____ Employer: _____

Gross Income: _____ Church Membership: _____

Mother's Address: _____

Phone Number: _____ Email: _____

Occupation: _____ Employer: _____

Gross Income: _____ Church Membership: _____

Household Status: Married Divorced Other _____

Other Dependent Children in the family (name, age) _____

How will you contribute your time and talent to NEWLHS? _____

What was your child's GPA this past school year? _____

Please provide information (monthly budget, unanticipated expenses, etc.) which you feel will assist in consideration of your need: _____

I certify that all the information in these documents are truthful, and I am accountable for all information provided:

Signature: _____ Date: _____

Completed applications can be submitted to:

- Mailed to: *N.E.W. Lutheran High School, 1311 S. Robinson Ave, Green Bay, WI 54311*
- or E-mailed to mcclellanj@newlhs.com