

Temple Beth Shalom

Religious School Scholarship Application: 2022-2023

TUITION AND FEES

Lower School: Grades K-3 \$650

Grades 4-7 \$825

Name of Student: _____ Age: _____ Grade: _____

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Name of Student: _____ Age: _____ Grade: _____

Parent #1:

Name: _____ Occupation: _____

Employed by: _____

Parent #2:

Name: _____ Occupation: _____

Employed by: _____

Approximate Family Monthly Income: _____

Other Sources of Income (i.e. child support, alimony, dividends or interest, etc):

Financial Obligations contributing to application for funds (e.g. medical bill, tuition, loans, etc.):

Statement of Need (other information which might be helpful to determine granting of financial aid):

Total Tuition and fees for all children in family: \$_____.

I request a scholarship in the amount of: \$_____.

I understand it is my responsibility to arrange a payment schedule with the Temple.

Name: _____ Signature: _____

Date: _____