

SCHOLARSHIPS AVAILABLE TO FAMILIES

It is important to apply for scholarships as early as possible to receive awards before tuition is due. Families are responsible for **full payment** until award is received. Families should apply for **Bison Fund Scholarships FIRST** and St. John Tuition Assistance if more financial assistance is needed. Please note that your 2025 **tax return** is needed to apply for both scholarships.

1. BISON FUND:

To see if your family is eligible, visit www.bisonfund.org and click on “apply now” to complete a pre-application online **immediately**. A timely application will help reduce the payment for the family.

- 1. ST. JOHN TUITION ASSISTANCE:** The Board of Christian Education is aware that tuition may cause a financial hardship beyond what the Bison Fund is able to offer. Therefore, a St. John Tuition Assistance Program is available under the direction of the Tuition Assistance Committee to aid in tuition cost for children entering **grades K-8**.

Forms required:

- 2026 Tuition Assistance Application
- Parents’ SIGNED, 2025 Federal Income Tax Return (pgs. 1 & 2)
- Student’s SIGNED, 2025 Federal Income Tax Return (if any)

This application is to be RETURNED TO THE OFFICE BY **APRIL 17, 2026**. Applications will be reviewed by the Tuition Assistance Committee AFTER THE BISON FUND HAS BEEN AWARDED. Review for aid is conducted in a confidential manner by the Tuition Assistance Committee.

*The committee **will not review** the Tuition Assistance application until a signed copy of both sides of the parents’ 2025 and/or the student’s 2025 Federal Income Tax returns are received.

APPLICATION DUE
TO THE OFFICE
NO LATER THAN
APRIL 17, 2026.

**ST. JOHN LUTHERAN CHURCH AND SCHOOL
TUITION ASSISTANCE FOR THE SCHOOL YEAR 2026-2027**

NAMES OF STUDENTS ATTENDING ST. JOHN

1. _____
Last First Grade (26-27) Tuition

2. _____
Last First Grade (26-27) Tuition

3. _____
Last First Grade (26-27) Tuition

OTHER DEPENDENT CHILDREN IN FAMILY

NAME _____ GRADE (26-27) _____ AGE _____

NAME _____ GRADE (26-27) _____ AGE _____

NAME _____ GRADE (26-27) _____ AGE _____

PARENTS Home Congregation: _____

FATHER'S NAME _____ OCCUPATION _____

MOTHER'S NAME _____ OCCUPATION _____

INCOME

Gross Income from Tax Form 1040, #9: \$ _____ (Attach SIGNED 2025 (1040 form) from Income Tax Return)

Estimated 2026 Gross Income: \$ _____

In considering application for this grant, plan your costs for all purposes at home. PLEASE FILL IN **ALL** QUESTIONS.

- 1. State the amount of tuition you feel you can pay during the year: (REQUIRED) \$ _____
- 2. State the amount of aid received by outside sources. (Other Church, Foundation, Grants, Bison Fund) \$ _____
- 3. State the amount of aid you are requesting: \$ _____

Please give additional information which you feel will assist us in our consideration of your need for Student Aid and attach to this form:

PARENT SIGNATURE: _____ DATE: _____