

Scholarship Application
Covenant Scholarship Organization
310 Extension St.
Mansfield, PA 16933

The purpose of this application is to gather the required information needed by Covenant Scholarship Organization to determine your eligibility for scholarship, according to the guidelines of the Pennsylvania Department of Community and Economic Development. Return the completed application to the address above.

Father - Stepfather - Guardian

Mother - Stepmother - Guardian

Name: _____

Address: _____

County: _____

Phone: (_____) _____

(_____) _____

List of Dependents: (All children and others living in the applicant's home who are supported by the applicant)

Name	Age	Grade
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

Student(s) are applying for enrollment at:

(Name of School)

(Address)

(_____) _____

(Phone)

Total Annual **Tuition** Required for students in grades K-12: \$ _____

Scholarship help is being requested for the school year **2012– 2013**.

(Over)

Required Income Information

What is your **Total Household Income** from all sources and all wage earners for 2005?

_____ Under \$20,000.00	_____ \$60,001.00 – \$70,000.00
_____ \$20,000.00 – \$30,000.00	_____ \$70,001.00 – \$80,000.00
_____ \$30,001.00 – \$40,000.00	_____ \$80,001.00 – \$90,000.00
_____ \$40,001.00 – \$50,000.00	_____ \$90,001.00 – \$100,000.00
_____ \$50,001.00 – \$60,000.00	_____ Over \$100,000.00

Please attach a complete copy (non-returnable) of your **2011** Federal Income Tax Return with your 1040, and W-2's. **Required.**

Realizing that the resources of Covenant Scholarship Organization are limited, and that there are many others who may also need assistance, I/we estimate that the amount of scholarship that I/We need for the **2012– 2013** school year is:

\$ _____ each month for _____ months.

Which months does your school require you to pay tuition each school year?

Our first tuition payment for each year is required on ____/____/____
Date

By signing below, I/we certify that this Scholarship Application Form is accurate and complete to the best of my/our knowledge. I/we agree to provide, if requested, documentation necessary to verify information reported.

1st Applicant's Signature

2nd Applicants Signature

Date Application was completed: ____/____/____.