



Financial Aid Application 2026-2027

30888 C.R. 6, Elkhart, IN 46514 574.674.8800 office@trinityl.org

Name First and Last	Date of Birth	2026- 2027 Grade	Public School would attend	School Attended 2025-2026	Individual Education Plan (IEP)		Prior Indiana Choice Scholarship			Prior SGO Scholarship		
					Yes	No	No	Self	Sibling	No	Self	Sibling
1.												
2.												
3.												
4.												
5.												

Primary Address _____

City _____ State _____ Zip Code _____

Community School District* (choose one):** Concord Elkhart Middlebury Mishawaka

PHM South Bend Other _____

Email Address _____

**This is the school district where your legal main residence is located.*

***One option must be selected or we cannot process your Indiana Choice Scholarship with the state*

Parent/Guardian Signature: _____

Date: _____

Acceptable Proof of Residence Documents

- Bank statement (dated within the last 90 days)
- Credit card statement (dated within the last 90 days)
- Current lease agreement
- Mortgage documentation
- Voter registration
- USPS change of address confirmation
- Current homeowner's, renter's, auto, or health insurance document

**For office use only*

Acceptable Documentation Provided

For SGO & Internal Scholarship Applicants Only

Children Living in Household:

Name (First & Last)	Child's Annual Income (If any)	Dependent on provided tax return? (Select One, If no please explain)
1.		Yes No
2.		Yes No
3.		Yes No
4.		Yes No

ALL Adult Household Members: - Annual Income

Name (First & Last)	Earnings From work	Public Assistance/ Child Support/ Alimony	Pensions/ Retirement/ All Other Income	Listed on Provided Tax Return (Select One, If no please explain)
1.				Yes No
2.				Yes No
3.				Yes No
4.				Yes No

Verification

All Federal Form 1040s are enclosed? Yes No (If no, please explain) _____

Does Form 1040 provide an accurate picture of total household income? Yes No

If No, please provide documentation. Examples include, Unemployment compensation statement, form 1099's, etc...

The students in this application are enrolled at Trinity Lutheran School for the 2026-27 school year. I understand that I am required to disclose ALL household members' financial information for the consideration of scholarships. I certify that all of the provided information is true and complete as stated.

Parent/Guardian Signature: _____ Date: _____