

UWMS ISLAMIC SCHOOL

SCHOLARSHIP (FINANCIAL AID) APPLICATION

2021 - 2022

***All submitted information is considered confidential by the school administration. Please attach your most recently filed federal tax return. If you do not have a tax return, provide the contact information of at least one reference.***

Applicant full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marital status (married, divorced, widowed): \_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse’s Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip code: \_\_\_\_\_\_\_\_\_\_

Contact email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of children attending UWMS Islamic school: \_\_\_\_

Total number of family members: \_\_\_\_

Total number of children in the family: \_\_\_\_

Family total annual income before tax: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child qualify for free or reduced meals at school? \_\_\_\_\_\_\_\_

Are you a teacher at UWMS School? \_\_\_\_\_\_\_

Are you a UWMS 2021 paid member? \_\_\_\_\_\_\_\_\_

Are you a UWMS volunteer? \_\_\_\_\_\_\_\_

What are you applying for (choose one)?

( ) 30% of tuition in financial aid

( ) 50% of tuition in financial aid

( ) 100% of tuition in financial aid

Is your recent 1040 (federal tax return) attached? \_\_\_\_\_, if not

Reference full name: \_\_\_\_\_\_

Reference address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reference email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reference phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_