

Parent Information:

Father's Name:

Address:

Occupation:

Employer:

Address:

Length of employment:

Gross Pay: _____

Net Pay: _____

(Please attach copy of pay stub)

Paid: weekly bi-weekly monthly

Mother's Name:

Address:

Occupation:

Employer:

Address:

Length of employment:

Gross Pay: _____

Net Pay: _____

(Please attach copy of pay stub)

Paid: weekly bi-weekly monthly

Other sources of income: (second job, child support, rental income, disability income, social security, etc. **Please provide proper documentation.**) _____

Please explain need for scholarship assistance:

Trumbull Loves Children, Inc. does not discriminate against any race, color, and creed, national or ethnic origin.

Father's Signature

Mother's Signature

Financial Information

***All applicants must provide their signed & filed 2017 Federal Income Tax Returns with this application, along with all verified income. Your application will not be processed without all the proper documentation of income and expenses.**

List all *monthly* expenses for your household. Do not include any items that are payroll deductions.

Loan Information

Please attach a copy of payment or coupon books

Rent or Mortgage Payments	\$
Condominium Common Charges	\$
Car Loan	\$
Student Loans	\$
Home Equity Loans	\$
<i>Total Loans:</i>	\$

Utilities

Electric	\$
Heat	\$
Water	\$
Cable TV	\$
<i>Total Utilities</i>	\$

Support

Child Support Payments	\$
Dependents not living at home	Name: _____
	Age: _____
Alimony	\$
<i>Total Support Payments</i>	\$

Other Expenses:

Total Monthly Expenses: \$ _____

For TLC use only

Date Received: ___/___/___ Reviewed by: _____ Scholarship Applied: _____

Notification Date: ___/___/___ Fee 1: \$ _____ Fee 2: \$ _____