

LRCS "New Student" Scholarship Application

For students going into first - fifth grades and enrolling in LRCS for the first time.



Contact Information

Parent Name	
Applicant Name (student)(s)	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Family Information

How many children do you have?

- 1 4
 2 5
 3 6+

Family Information Continued

Does the scholarship applicant have siblings that attend LRCS? Yes _____ No _____ How many?

- 1
 2
 3+

Essay

Explain your financial need and why Christian education is a priority for you.

