

# LVW Financial Assistance Form

It is the desire of the Board of Directors of Lutheran Vanguard of Wisconsin (LVW) that any student who truly wants to participate not be denied membership because of financial hardship. The Board also recognizes the fact that, although the cost may be high for a student to meet, some prioritizing and choices have to be made on the part of the individual and his or her family. Therefore, financial assistance may be available to students who demonstrate a circumstance that makes it difficult, if not impossible, to pay the entire fee for the upcoming summer.

**Taking into consideration your blessings from God, please evaluate your family's situation using this form before entering what you believe is the amount of assistance your student will need to be able to participate in LVW for the 2010 season.** The Committee asks you to evaluate this prayerfully and carefully from a Christian standpoint so that we can assist as many students as possible.

The Committee will meet to review all requests. The committee may also contact your school's financial office for assistance in determining need. You will be notified as soon as a decision has been made.

---

---

Instructions: Return this form to FVL by **Wednesday, December 23, 2009.** Please fill out one form per student.

James Neujahr  
Attn: LVW  
Fox Valley Lutheran HS  
5300 N Meade Street  
Appleton, WI 54913

## **Family Information**

Student Name \_\_\_\_\_

Parent(s) Name \_\_\_\_\_

Grade \_\_\_\_\_ School \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent E-Mail \_\_\_\_\_ Home Phone \_\_\_\_\_

Student's Previous Years in LVW                      1           2           3           4

## **Financial Aid Request**

(A) \$ \_\_\_\_\_ Enter amount the parent/guardian can contribute

(B) \$ \_\_\_\_\_ Enter amount the student can contribute

(C) \$ \_\_\_\_\_ Enter total of other assistance student will receive from other sources (school music support groups, relatives, school grants for music camps, etc.)

(D) \$ **895** Fee for 2010 Season

(E) \$ \_\_\_\_\_ Enter total of lines A, B, and C

(F) \$ \_\_\_\_\_ Enter amount of financial aid requested by subtracting line E from Line D

Fee for 2010 Season:

**\$895**

(FVL Students receive \$150 in aid from the Music Associates. Check for special funding that may be available from your school.)

*~Please see next page~*

**Student Work Status**

Circle the one which best describes your work status: **Part-time**    **Full-time**    **Not employed**

**Special Circumstances**

If you feel there are any special circumstances of which the committee should be aware while considering this application, please write them below.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_