

Central Wisconsin Lutheran High School
Financial Aid Form 2026-2027



PARENT(S) LAST NAME _____

STUDENT(S) LAST NAME _____

PHONE # _____

To be considered for Financial Aid, you must submit a new form each year and attach a copy of all necessary tax documents listed below. Grants are determined and awarded each year by a financial review process that uses an objective set of guidelines to determine eligibility factors. Awards will be determined within 2 months of receiving a completed application and all necessary documentation. The evaluation of tuition assistance is based upon the dollars we have available and the need of the families that have requested aid.

Please note the required tax year documentation.

1. Detailed copies of all pages and Schedules of 2025 Federal Income Tax Return Form 1040, 1040A or 1040EZ.
2. Copies of all 2025 W-2 Wage and Tax Statement Forms. (All documentation should be submitted on regular 8 1/2 x 11 paper.)
3. This application must be filled out in its entirety, signed and dated by the Parent(s) or Guardian(s) listed in Sections A and B. **IMPORTANT:** If the above items do not accompany this application, your application will not be considered complete.

**** All information is strictly confidential.** Information provided is simply used to determine what amount, if any, the applicant will be awarded. Discussion of financial aid received with others will jeopardize future financial assistance.

The SCRIP program may be an option to assist with tuition. It is a way to earn money when you buy gift cards to participating vendors. For example, gas cards from Kwik Trip. Purchasing a gift card earns a percentage of tuition dollars. Consider your monthly expenses of gas/food/dining out, etc.

As a new school, we are not allowed to offer the Wisconsin Parental Choice Program for the 2026-2027 school year. We will re-apply for the 2027-2028 school year.

A. Parent, Guardian or other adult responsible for tuition (Check one):

Father Mother Stepfather Stepmother Other Adult (If Other Adult, please specify):

B. Additional parent, guardian or other adult residing with adult responsible for tuition at the same residence (Check one):

Father Mother Stepfather Stepmother Other Adult (If Other Adult, please specify):

C. Parent Asset Information

Current value of cash, checking, savings \$ _____

Family Residence: owned _____ rented _____ Monthly Payment _____

Year Purchased _____ Purchase Price _____ Present Value _____

Other Real Estate and Investments _____

D. Optional - A letter explaining extenuating circumstances to be considered. Example might be two children in college plus our high schooler.

E. Dependents

	Last Name	First Name	Age	Grade in Fall 2026	Applying for Aid	Amount we can afford per month	Tuition Charged yearly per student
1							
2							
3							
4							
5							

SIGN HERE I/we declare that the information on this form is true, correct, and complete to the best of our knowledge. We understand that sharing our knowledge of any aid we receive with other families will not only jeopardize future financial assistance for others, but for us as well. I/we authorize Central Wisconsin Lutheran High School to use such forms ONLY in determining Financial Aid.

Parent/Guardian A _____ Date: _____

Parent/ Guardian B _____ Date: _____