

MAPLEWOOD ACADEMY
700 MAIN ST. N
HUTCHINSON, MN 55350

CHURCH MATCHING FINANCIAL AID PROGRAM APPLICATION

DATE: _____

Dear Pastor/Church Board:

I, _____ (student name) am applying for the "Matching Program" at Maplewood Academy this year. In this program, the scholarship fund will attempt to match the amount pledged by your church up to a maximum of \$2,000 for dorm students and \$1,000 for community/day students, based on financial need.

I request that the Church Board consider my request to help fund my tuition expenses for the 2022-2023 school year at Maplewood Academy.

Thank you for your consideration. Please kindly inform us as to the decision of the church board at your earliest convenience.

Sincerely,

Student: _____ Parent: _____

CHURCH COMMITMENT

Dear Pastor: Please complete and return this portion back to your church member when a decision is reached so that it can be submitted to the school's business office. Thanks!

Date: _____

Church Name: _____ has voted to assist

_____ (student name)

In the yearly amount of \$ _____ (You can send a monthly check August- May, or by semester with half due by October 15, and the second half by March 15.)

Signatures: (two signatures required)

Pastor: _____ Church Treasurer: _____