

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 2020-2021 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: \_\_\_\_\_

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**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 \_\_\_\_\_