

**The Iowa Lutheran  
School Tuition Organization (ILSTO)  
2017-18 Tuition Assistance Application**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Number in Family: \_\_\_\_\_ Number of Children (K – 12) attending this school: \_\_\_\_\_

Name the school and city location that your child/children will be attending in 2017-18?

(example, St. Paul, Sioux City) \_\_\_\_\_

Are you a member of the church or one of the churches associated with the school?  Yes  No

**Attending Child's Name, Grade and Tuition: STO funds apply only to Grades K - 12**

Name: \_\_\_\_\_ 2017-18 Grade: \_\_\_\_\_ Tuition: \$ \_\_\_\_\_ .00

Name: \_\_\_\_\_ 2017-18 Grade: \_\_\_\_\_ Tuition: \$ \_\_\_\_\_ .00

Name: \_\_\_\_\_ 2017-18 Grade: \_\_\_\_\_ Tuition: \$ \_\_\_\_\_ .00

Name: \_\_\_\_\_ 2017-18 Grade: \_\_\_\_\_ Tuition: \$ \_\_\_\_\_ .00

**Please check the following statements as appropriate: Read the following carefully.**

\_\_\_\_\_ I have attached the first page of my 2016 completed federal return which shows Line 22 on 1040 return  
(Do not send in your application without your federal tax return.)

\_\_\_\_\_ I am on disability and do not file a tax form, but our family's disability income is \$ \_\_\_\_\_ per month.  
Please fill out the attached form below.

\_\_\_\_\_ The number I have entered above for "Number in Family" matches the total number  
of exemptions on page 1 of your federal tax return. If not, please explain on reverse side.

\_\_\_\_\_ This the first year I have a child(ren) attending this school in K-12?  Yes  No

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail completed form AND first page only (not electronic filing statement) showing Line 22 of your  
1040 2016 completed Federal Tax Return to:**

**Iowa Lutheran STO, PO Box 176, Terril, IA 51364**

Applications for the 2017-18 school year must have a postmark no later than April 28, 2017.  
Second round applications must have a postmark no later than Friday, August 4, 2017



**FOR OFFICE USE ONLY – PARENTS DO NOT COMPLETE THIS SECTION**

Postmark Date \_\_\_\_\_ Family \_\_\_\_\_ Line 22 or 15 Amount \_\_\_\_\_

Tuition Total \_\_\_\_\_ Income percent of Poverty Guideline \_\_\_\_\_

Parent Name \_\_\_\_\_

I have listed \_\_\_\_\_ as the number of people in my family on this application form, but my tax form indicates \_\_\_\_\_.

The reason for this is:

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

We frequently need testimony as to the effectiveness of this program so we can show the legislators that it is necessary for them to continue it. We would appreciate it, if you would write how this program assists you in sending your child to one of our Iowa Lutheran schools. Please write something below, and let us know if we can use your name or if you want to remain anonymous.

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

\_\_\_\_\_ You may use my name.

\_\_\_\_\_ You may use the name of the school my children attend.

**NON TAX FILER**

**AFFIDAVIT**

The undersigned individuals(s) duly swears that he or she did not earn enough income to be required to file a federal and Iowa individual income tax return for the tax period ending December 31, \_\_\_\_\_. Therefore, in seeking a tuition grant for \_\_\_\_\_(name) for the upcoming school year, I am not required to submit a copy of my federal or Iowa individual income tax return to verify my household income.

Name of individual(s) \_\_\_\_\_  
\_\_\_\_\_

Date  
signed: \_\_\_\_\_