



**International Christian School of Lima**

Av. Angamos Oeste 1155  
 Miraflores, Lima 18 Peru  
 Telephone: 442-6149  
 Fax: 440-3134  
 icslimaperu@gmail.com  
 www.icslima.org



**APPLICATION for TUITION ASSISTANCE PROGRAM**

Families requesting financial assistance for tuition are asked to complete one of these forms each year. The information is needed to help make decisions fairly and equitably. This form will be reviewed by the Scholarship Committee after enrollment applications and registration deposits have been received. You will be informed in writing when a decision has been made. Your early submission of the Application for Tuition Assistance will be appreciated.

Please state your reasons for applying for financial assistance.

**FAMILY DATA**

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Father's Name	Home phone	Cell phone	Email address
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Mother's Name	Home phone	Cell phone	Email address
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**Current Residential Address**

**Permanent Address**

<u>Children's Names</u>	<u>Sex</u>	<u>Date of birth</u>	<u>Present Grade and School</u>	<u>Financial Assistance Needed?</u>
1.				___yes ___no
2.				___yes ___no
3.				___yes ___no
4.				___yes ___no

## EMPLOYMENT/INCOME INFORMATION

<u>Information Needed</u>	<u>Applicant</u>	<u>Spouse</u>
Employer:	_____	_____
Employer's Address:	_____	_____
Position/Title:	_____	_____
Business Telephone:	_____	_____
<b>Monthly Income</b>		
Gross Base:	_____	_____
Bonus/Gifts:	_____	_____
Housing Allowance:	_____	_____
Car Allowance:	_____	_____
Retirement Allowance:	_____	_____
Educational Allowance:	_____	_____
Other: (Airfare, etc.)	_____	_____
<b>Total Monthly Income:</b>	<b>_____</b>	<b>_____</b>

Please describe other income and allowances not listed above (i.e. **savings accounts, child support, alimony, interest, dividends, retirement income, etc.**)

**Please list your income listed on last year's income tax statement.** \_\_\_\_\_  
**Enclose a copy of your US tax forms with this application.**

**Non-US citizen enclose a copy of your "Declaracion Jurada (de Ingresos)."**

Please fill out the following:

**Housing (choose one)**

We own our home            Monthly payment: \$ \_\_\_\_\_

We rent a house            Monthly payment: \$ \_\_\_\_\_

We rent an apartment      Monthly payment: \$ \_\_\_\_\_

**Transportation**

Car #1 Model \_\_\_\_\_ Make \_\_\_\_\_ Year \_\_\_\_\_

Car #2 Model \_\_\_\_\_ Make \_\_\_\_\_ Year \_\_\_\_\_

**Club Memberships**

Name: \_\_\_\_\_ Monthly cost: \_\_\_\_\_

**Helpers** (maids, drivers, security personnel, gardeners, etc)

Helper #1 Monthly Salary \_\_\_\_\_

Helper #2 Monthly Salary \_\_\_\_\_

**Services**

**In what way can you volunteer to help the school?**

(Have you any teaching experience? Have you any coaching experience? Can you offer music lessons? Are you a translator? Do you have hobbies or have you played a sport that you could share with the students by offering an after school club? Can your business offer reduced rates for services the school normally uses?)

**ASSISTANCE REQUESTED**

Please list the amount you can pay for tuition each month for each child.

- 1.
- 2.
- 3.
- 4.

**We certify that all information provided by us is correct and complete. We authorize ICSL to make inquiries about us that it deems necessary and appropriate for the purpose of evaluating our application.**

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Father's Signature                      Date                      Mother's Signature                      Date

**For ICSL office use**

Scholarship Committee Notes

Date Received:

Application Fee received      Yes      No

Interviewed by:

Date:

Notes: