Mortimer C. and Elizabeth Ann Schaidt Scholastic Tuition Fund Application

1.	Applicant's Name: (Please Print)			
2.	Telephone:			
	Home Address:			
	College Address (if known):			
5.	Is the applicant a member of St. Paul's Lutheran Church, Cumberland MD?			
	YesNo			
6.	Is the applicant a student in, or a graduate of, an Allegany County school?			
	YesNo			
7.	Proposed Major Course of Study:			
8.	What degree is the applicant pursuing (graduate, bachelor, associate, technical/trade, etc.)?			
9.	When does the applicant expect to receive the degree?			
Ple	case use the attached worksheet to answer the following questions. The			
wo.	rksheet must be submitted with the application.			
wo. 10.	what is the total expected cost of attendance for the year?			
wo 10. 11.	What is the total expected cost of attendance for the year? Of this amount, how much is tuition for the year?			
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5. Any general comments the applicant would like to make:				

Deadline for application submission is June 15th. Applications received after this date will not be reviewed or considered eligible for the scholarship award.

Educational Costs Worksheet

Expected I	Educational Costs per year*	
Tuition:		
Room:		
Meals:		
Mandatory	Fees:	
Textbooks:		
Misc (Trav	el expenses, computer, etc.):	
TOTAL cost of attendance:		
Your/Fam	ily contribution to education	al expenses
Student loa	n(s):	
Parent cont	ribution:	
Other Scho	larship(s):	
Grant(s):		
Contributio	on from student's wages:	
TOTAL co	ntribution:	
Cost of Att Total Cont		
	h your college/university's Finctional expenses for the year.	nancial Aid office to find out the
I certify tha	at the information given is true	and correct, to the best of my knowledge.
Signature		Date
Return this	application and any additiona	l documentation required to:
By Mail:	Schaidt Scholarship Commit St. Paul's Lutheran Church 15 N. Smallwood Street Cumberland MD 21502	tee

stpauls scholar ship 2015@gmail.com

By Email: