

Scholarship Application

Good Counsel Learning Center

ATTN: Sr. Dorothy Zeller, Executive Director

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507-389-4229 | director@gclearningcenter.org

www.gclearningcenter.org

* Required

Household Information

Please tell us about the people who live in your household.

1. Family (Last) Name: *

2. Number of People in Household: *

3. Father's Name:

4. Mother's Name:

5. Children's Names:

Income

Please tell us about the money you receive every YEAR.

6. Gross Income (IRS Form 1040, line 22):

7. Social Security Income:

8. Child Support:

9. Other Income:

10. TOTAL ANNUAL INCOME:

Expenses

Please tell us about the money you spend every MONTH.

11. Housing/Rent:

12. Utilities (electricity, water, internet, phone):

13. Car/Vehicle Payments:

14. Insurance:

15. Household (food, clothes, toiletries):

16. Child Care:

17. Medical:

18. Remittance (money sent to family or friends back home):

19. Gas and Travel:

20. Other Expenses:

21. TOTAL MONTHLY EXPENSES:

Proof of
Income

Please attach a copy or photo of YOUR 2019 TAX RETURN or 2 RECENT PAY STUBS.
If you cannot upload, please call Sr. Dorothy at 507-389-4229 or email her at director@gclearningcenter.org.

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Files submitted:

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