# St. Louis School

## 2019-2020 Choice Scholarship Program Application

**Please submit this form along with an attached copy of the first page of your 2018 1040 federal tax form to either the School or Parish Office**
****All information provided will remain strictly confidential****

Last Name First Middle Initial

Present Address City State Zip Code

Home Phone Cell Phone E-Mail Address

Preferred Method of Contact: Home Phone Cell Phone E-mail
(circle one)

Number of people in household: _____

Student(s) Name 2019-2020 Grade

_____

_____

_____

_____

School District in which you reside

Did you receive a voucher last year? YES NO
(circle one)

Did your child receive an SGO Grant last year? YES NO
(circle one)

Has your child attended a traditional or public charter school in Indiana for at least the last two semesters? YES NO
(circle one)

Does your child have an Individualized Education Plan (IEP)? YES NO
If yes, who provides the services? St. Louis School or Batesville City Schools? _____

Signature

Date

**Voucher applications will be processed in 3-5 business days.**
**The Parish office will contact you with the value of your voucher.**