

GSI Tuition Grant Application

Student Name _____

Parent/Guardian Name _____

Address _____

City _____ State _____ Zip Code _____

Telephone Number _____

Email Address _____

Student's grade for 2024-2025 school year:

Freshman

Sophomore

Junior

Senior

On the back of this application, please comment on why you hope to receive a grant. Comments from both the student and a parent are preferred.

Signature of Student _____ Date _____

Signature of Parent/Guardian _____ Date _____

Please return to Great Plains Lutheran High School on or before June 30, 2024.

**Great Plains Lutheran High School provides a Christ-centered education
to assist families in nurturing students as lifelong disciples of Christ**