



### FINANCIAL AID APPLICATION 2025-2026

Applicant's Name \_\_\_\_\_ Grade in 2025-26 \_\_\_\_\_  
Applicant's Name \_\_\_\_\_ Grade in 2025-26 \_\_\_\_\_  
Applicant's Name \_\_\_\_\_ Grade in 2025-26 \_\_\_\_\_  
Applicant's Name \_\_\_\_\_ Grade in 2025-26 \_\_\_\_\_

**By March 15** Submit Parents' Financial Statement (PFS) to School and Student Service (SSS).  
**By March 30** Submit this form and all other required paperwork to the Saint Mark Lutheran School office.

**Father/Guardian #1**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Place of Employment: \_\_\_\_\_  
Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
Parent Status: \_\_ Biological Parent \_\_ Step Parent \_\_ Legal Guardian \_\_ Adoptive Parent \_\_ Other

**Mother/Guardian #2**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Place of Employment: \_\_\_\_\_  
Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
Parent Status: \_\_ Biological Parent \_\_ Step Parent \_\_ Legal Guardian \_\_ Adoptive Parent \_\_ Other

**Marital Status:** \_\_ Married \_\_ Separated \_\_ Divorced \_\_ Single \_\_ Never Married \_\_ Widowed

**Applicant resides with:** \_\_\_\_\_

**Estimated maximum amount you can afford to pay annually towards Saint Mark Lutheran School tuition \$ \_\_\_\_\_ per child.**

**In addition to Saint Mark's financial assistance, indicate all other assistance you are seeking or plan to seek:**

Preschool Open Doors YES or NO  
Child Care Connection Hawaii YES or NO  
Kamehameha Schools Pauahi Keiki Scholars Scholarship (must be native Hawaiian) YES or NO  
Kamehameha Schools Kipona Scholarship (must be native Hawaiian) YES or NO  
Kamehameha Schools & Saint Mark K-8 Community Collaboration (must be native Hawaiian) YES or NO  
Any other financial assistance YES or NO

If YES, please explain: \_\_\_\_\_

With my signature below, I declare that to the best of my knowledge and belief all information included on this application and all of the supporting documents is true, correct, and complete.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_