



## Kayla Samascott Wilson Scholarship Application

*This Scholarship will be awarded to:*

- Current student(s) of Church Street Preschool under financial strain who are unable to pay tuition.
- Current or past Church Street Preschool families suffering the loss of a parent.

Please <b>print</b> your answers.			
1.	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Last Name: _____</td> <td style="width: 50%; border: none;">First Name: _____</td> </tr> </table>	Last Name: _____	First Name: _____
Last Name: _____	First Name: _____		
2.	Mailing Address::  <b>Street:</b> _____  <b>City:</b> _____ <b>State:</b> _____ <b>Zip:</b> _____		
3.	Daytime Telephone Number: (         ) _____		
4.	Email address: _____		
5.	Date of Birth: (MM/DD/YYYY) _____		
6.	Is your child a current CSP Student? (Circle one)  <div style="display: flex; justify-content: space-around; width: 100%;"> <span>YES</span> <span>NO</span> </div>		
7.	If no, what year(s) did your child attend CSP? _____		

