

MERCY SCHOOL

3900 NW 39th Street Oklahoma City, OK 73112 Tel: (405) 946-3729 Fax: (405) 946-1227

ZAKAT APPLICATION (Confidential)

Instructions:

1. Please provide the information requested below and mail addressed **Attention: Zakat Committee of Mercy School** to the above address.
2. Attach a copy of the last 3 years tax returns, last 3 bank statements and 2 recent paystubs.
3. **Application deadline:** All applications must be mailed to the office no later than May 1st for the fall semester and December 1st for the spring semester. **Please note:** Due to limited funds, applications will not be accepted after each deadline for the appropriate semester.
4. All decisions made by the Zakat Committee are final.

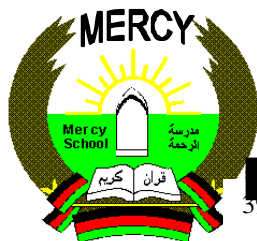
Children Seeking Financial Assistance (Tuition): Please list all of the children for whom you are seeking financial assistance.

1	Name	Date of Birth	Age	Grade
	Last School Attended			
2	Name	Date of Birth	Age	Grade
	Last School Attended			
3	Name	Date of Birth	Age	Grade
	Last School Attended			
4	Name	Date of Birth	Age	Grade
	Last School Attended			
5	Name	Date of Birth	Age	Grade
	Last School Attended			

Parents(s)/Legal Guardian Information

Mother			Father		
Name			Name		
Street Address			Street Address		
City	State	ZIP	City	State	ZIP
Home Phone	Work Phone		Home Phone	Work Phone	

Please provide the complete financial information of your household on the next page. Thank you.



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Financial Information				
1. Income Earned by Father after Taxes:	\$	2. Income Earned by Mother after Taxes:	\$	
Please list all other sources of income and the amount received from each:				
Source of Income				Amount
3.				\$
4.				\$
5.				\$
6.				\$
Total Household Income (Please add lines 1-6)			Total	\$
Please check one:	Own our home	Rent our home	Amount of Rent per Month	\$
Number of automobiles owned by you and your family?				
Can either parent offer rides to others?				
Can either parent volunteer some services to the school? (Ex. Assist teachers, carpentry, yardwork, etc.) List all the services that you can offer and the weekdays and times that you are available.				
Please use the space below or provide separate attachments of any other special information you would like the Zakat committee to consider. (Ex. extraordinary debt, numerous financial obligations or responsibilities, etc. Appropriate documentation of indebtedness or other information must be submitted to be considered.)				
The actual cost per student to the school is about twice the tuition payment; how much can you afford to pay?				\$
By signing below, I solemnly affirm that all the information provided in this application is true to the best of my knowledge.				
Signature			Date Signed	

The scholarship committee regrets any inconvenience to you for requesting this information; however, currently, there is no other method of equitably determining need. All information provided in this application is regarded and held as confidential. Thank you for your cooperation.

Please visit us at www.mercyschool.com