

MCMS Student Scholarship Organization

Application Information

- All families with children attending school between kindergarten and grade twelve are eligible to apply for a scholarship.
- The MCMS SSO does not discriminate on the basis of race, color, religion, nationality, sex, ethnicity, handicap, or school preference in the awarding of scholarship funds.
- Scholarship funds are awarded as available on a rolling basis to families who have submitted complete applications beginning mid-March of each year.
- MCMS SSO will award between 20-50% of a child's tuition per year.
- Proof of tuition (invoice, enrollment paperwork, or school website tuition page) must be included with the application.
- Only schools that are Qualified Education Providers (verified schools recognized by the state of Montana) may register and receive scholarship awards for students.

The 2026 Application period opens 8am on Friday, May 22 2026

To submit, email applications to MCMS.studentscholarships@gmail.com.

For families with multiple children, please submit one application per child.

(scroll down for application)

MCMS Student Scholarship Organization
2026 Application

You will receive notification whether funds are awarded within ten business days of receipt of a complete application. If your application is incomplete you will be invited to complete and resubmit it, so long as funds remain available. Thank you!

Parent/Caregiver Name _____

Address _____
Street City State Zip

Phone _____ Email _____

Child's Name _____ Child's Birthdate _____

Current School _____

Time attending current school (in years or months) _____

Applying scholarship funds to the following school: _____

Annual tuition at this school for the 2026-27 School year: _____

Attached proof of tuition (circle one): a) invoice b) website link c) enrollment paperwork

School Admissions/Tuition officer: _____

Phone _____ Email _____

Your income bracket and the number of children you have in private school is used to determine the percent of scholarship awarded (if available to award). Please indicate your family's income bracket in 2025:

___ below \$100,000.00 per year

___ between 100,000.00 and \$120,000.00 per year

___ between \$120,000.00 and \$150,000.00 per year

___ over \$150,000.00

How many children do you have enrolled in private school? _____

How many children below the age of five do you have enrolled in private school? _____

I confirm that the information entered here is true and accurate to the best of my knowledge.

Signature