

**ST TERESA OF AVILA CATHOLIC SCHOOL
APPLICATION FOR TUITION ASSISTANCE**

St. Teresa of Avila Catholic School attempts to provide tuition assistance funds for families: 1) whose students demonstrate effort and application towards academic progress; and 2) who have a clear financial need. Funds available are limited. Presentation of this application does not guarantee tuition assistance. The principal and the Tuition Assistance Committee will review applications. Information provided by the applicant will be held in strict confidence.

Parent/Guardian Names: _____ Years at this school _____

Address: _____ Home Phone _____

Child/Children's Names: _____ Grade _____
_____ Grade _____
_____ Grade _____

Father's occupation including place of business: _____ #Yrs. _____ Wrk Ph _____

Mother's occupation including place of business: _____ #Yrs. _____ Wrk Ph _____

Marital Status _____ both parents in home _____ single parent family _____ legal separation _____ divorced _____

Do you receive child support for this student? _____ If so, what is the monthly amount? _____

Do you receive alimony? _____ If so, what is the monthly amount? \$ _____

What is your total monthly income? (**Please include ALL sources**) _____

Family residence is: _____ owned _____ rented Monthly payment amount: _____

How many persons live in your residence? _____

Please provide any additional information that significantly affects your ability to pay (attach additional page if necessary):

Status of tuition: _____ current _____ past due in the amount of \$ _____

Does your family belong to St. Teresa of Avila Parish? _____ Envelope # _____

Please indicate what type of assistance you are seeking:

1. Deferral of payment _____ How much \$ _____ and for how long _____

Please explain: _____

2. Assistance in the amount of \$ _____ (**Please be as specific as you can**)

PLEASE ATTACH TO THIS APPLICATION:

1. A copy of your current 1040 tax return (with all schedules)
2. A copy of two recent wage/payroll stubs
3. Copies of **ALL** current checking, savings, and investment statements

(Applications will not be considered without these documents and any assistance could be delayed or not given as a result)

PLEASE RETURN THIS FORM WITH ALL DOCUMENTATION IN A SEALED ENVELOPE. ON THE OUTSIDE OF THE ENVELOPE INDICATE THAT IT IS A TUITION ASSISTANCE APPLICATION. **DO NOT** INCLUDE IDENTIFYING INFORMATION ON THE OUTSIDE OF THE ENVELOPE.

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: _____