

St. Monica Parish and School
Tuition Assistance Request for the School Year 2017 - 2018

**Complete this application and submit all supporting documentation forms
to the school office by May 12th 2017**

Parent/Guardian name: _____

Parent/Guardian name: _____

Home address: _____
Street

_____ City _____ Zip

Telephone H: _____ W: _____ C: _____

Name(s) of child(ren) attending St. Monica School:

_____	Grade _____
_____	Grade _____
_____	Grade _____

Is your family registered in St. Monica Parish? Yes, (if so, include envelope #) _____ No

Section A: Review of School Year 2016 - 2017 Tuition Arrangement

1. Did you request St. Monica Parish/School tuition assistance for the 2016 – 2017 school year?

Yes No Did you receive assistance? Yes No

1a. What was the total amount of Parish/School tuition assistance you received? _____

1b. How much in tuition did your family pay in total to St. Monica School for the 2016 - 2017 school year, after receiving all forms of financial assistance? _____

2. For the 2016 - 2017 school year, did you receive financial aid from outside sources?

2a. The BASIC Fund, Yes, Amount: _____ No

2b. The Archdiocesan Family Grant (TADS), Yes, Amount: _____ No

(Please complete the all pages of this application)

Section B: Request of School Year 2017 - 2018 Tuition Arrangement

3. What is your tuition rate amount scheduled for the 2017 - 2018 year? Category: _____ Amount: _____

4. How much tuition are you projecting to afford for the 2017 - 2018 school year? _____

5. We request that families first seek tuition assistance from outside sources before applying to St. Monica Parish/School. For the 2017 - 2018 school year, have you already completed an application for tuition assistance from the following programs?

5a. The S. F. Archdiocesan Family Grant Program (TADS), Yes, award \$: _____ No

5b. The BASIC Fund Yes, award \$: _____ (circle one: Renewal Packet or New Application), No

Please provide appropriate documentation for each source when submitting this application, if applicable.

6. In order to qualify for St. Monica Parish/School Tuition Assistance, please submit the following along with this application for our records:

1. A cover letter indicating your family's reasons for applying for St. Monica Parish and School tuition assistance and an explanation of your family's current financial situation.
2. A complete copy of the your family's 2016 (or latest) Federal and State Tax Returns

Note: Submit one set of returns for the family if parents have filed jointly or submit individual parent returns if parents have filed separately. (If parents are divorced, etc.)

3. Completion of the *Household Finances Worksheet* (Section C of this application)
4. Verification of your family having applied to an outside source for tuition assistance. Please provide evidence of your family's SF Archdiocese Family Grant (TADS) application and/or your BASIC Fund application and/or renewal form(s) as applicable. Note: the applications and form(s) and all appropriate supporting documentation will have been sent directly to the source agencies by the indicated deadline(s).
 - a. SF Archdiocese Family Grant notes: _____
 - b. The Basic Fund notes: _____

Section C: Household Expenses Worksheet

Please provide the information below in order to assist us in analyzing your financial needs. Make estimates and/or provide documentation where necessary.

<u>Expense Category</u>	<u>Monthly Amount</u>
1. Rent/Mortgage	_____
2. Medical/Insurance	_____
a. (If you receive Medi-Cal or are eligible for other federal/county/state service, please provide information)	
3. Gas/Electric/Utilities	_____
4. Groceries	_____
a. (If you receive food stamps please provide information)	
5. Car payments/Transportation	_____
a. (Please provide information/receipts as well as estimates for gas purchases)	
6. Cable/internet/cell phone	_____
7. Entertainment	_____
8. Tuition from other schools (if applicable)	_____
9. Other	_____
10. Other	_____
11. Child Support/Alimony (if applicable)	_____
12. <u>Total:</u>	_____

Note: if families are considering placing children in afterschool enrichment programs, please understand that the school administration expects the regular school tuition to be the 1st priority for the family if you are applying for financial assistance.

Please explain any special circumstances to be noted regarding your Monthly Household Expenses:

Final Section:

Tuition Assistance Request: Considering the St. Monica Parish/School policy of requiring all families to first seek outside sources of tuition assistance in addition to Parish/School Tuition Assistance, and having completed the Household Expenses Worksheet, what is the total amount of tuition assistance that you are requesting from St. Monica Parish/School for the 2017 – 2018 school year?

Amount: _____

Signatures:

I/we certify that the information given above is accurate to best of my/our knowledge.

Parent/Guardian signature

Date

Parent/Guardian signature

Date

St. Monica School Non-Discriminatory Policy

St. Monica, mindful of its mission to be witness to the love of Christ for all, admits students of any race, color, and national and/or ethnic origin to all rights, privileges, programs, and activities generally accorded to or made available to students at this school. St. Monica School does not unlawfully discriminate on the basis of race, color, and national and/or ethnic origin, age, sex, or disability in administration of educational policies, admissions policies, scholarship and loan programs and athletic and other school-administered programs.

Likewise, Saint Monica School does not unlawfully discriminate against any applicant for employment on the basis of age, sex, disability, race, color and national and/or ethnic origin.”

For office use only:

- Date tuition request submitted: _____
- Received Completed Request Form and Files: _____
- Received copy of 2016 Tax Returns: Federal: ____ State: ____ (Notes: _____)
 - If parents are divorced/separated, tax returns are received from each parent: ____
- Received copies of W-2(s): _____
- Tuition Assistance approved: Yes ____ No ____
- Amount granted: _____
- Date approved: _____

Comments: