



Great Teachers. Great Education.

Application for Need-Based Tuition Assistance 2019-2020

Student Information

Grade in 19-20

Name _____

Name _____

Name _____

Name _____



Family Information

Father's Name _____ Occupation _____

Address _____ Place of Employment _____

Mother's Name _____ Occupation _____

Address _____ Place of Employment _____

Children in household NOT attending St. Rose Catholic School: **Do not include the children above.**

All fees are to be paid by every student.
Any assistance is for tuition only.

NAME	SCHOOL GRADE IN 2019-2020	AGE
_____	_____	_____
_____	_____	_____
_____	_____	_____

TUITION RATES		FEES	
1 Student	\$5,600.00	Books \$150	Technology \$125
		Kewpee \$100	Registration \$35/\$50

2018 TAX FORM MUST ACCOMPANY APPLICATION

THIS SECTION MUST BE COMPLETED BY PARENT OR GUARDIAN

Gross Income per Year for Each Person	Father	Mother
1. Wages, Salary	_____	_____
2. Social Security	_____	_____
3. Public Assistance	_____	_____
4. Unemployment	_____	_____
5. Child Support	_____	_____
6. Pension/Retirement	_____	_____
7. Other	_____	_____
8. TOTAL YEARLY INCOME	_____	_____

It is our goal that no child be denied the benefits of a Catholic education because of the inability of the parents to pay the full tuition cost. There are guidelines for those requesting assistance.

- *Parents receiving tuition assistance are asked to contribute five (5) service hours for each \$100 of assistance granted in addition to the twenty hours expected of all families.
- *If a parishioner, you & your school-aged students must attend regularly at weekend Mass at St. Rose and use your weekly offering envelopes (Amount of contribution not considered.) A member of immediate family must place envelope in collection. Parish Envelope # _____
- *Fulfill assigned volunteer hours at church or school (including, but not limited to, parish festival).
- *Participate in fundraisers.
- *The deadline for returning families to request assistance is April 12, 2019.

ALL FEES (Book & Technology), ARE TO BE FULLY PAID IN ADDITION TO YOUR TUITION AMOUNT.

Please indicate how much tuition you can afford this year for this student _____.

THIS AMOUNT MUST BE FILLED IN SO THAT WE WILL BE ABLE TO ESTIMATE OUR NEXT YEAR'S BUDGET. DO NOT LEAVE THIS SECTION BLANK! All must pay some tuition.

Signature of Parent/Guardian _____ Date _____

NOTES (additional information you would like us to know concerning your financial situation):