



DATE: _____

Great Teachers. Great Education.

Application for Need-Based Tuition Assistance 2022-2023

Student Information

Grade in 22-23

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 2022-2023	AGE
_____	_____	_____
_____	_____	_____
_____	_____	_____

TUITION RATES

1 Student \$5,695.00

FEES

Registration \$35/\$50
Books \$150 (per student)
Technology \$125 (per student)

2021 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 15, 2022.

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):