



St. Mary's School

140 South 10th Street ~ PO Box 500
Bird Island, MN 55310-0500

www.stmarysschoolbirdisland.com

320-365-3693

320-365-3142 Fax

APPLICATION FOR TUITION ASSISTANCE FUNDS

(Please fill out front and back)

NAME: _____ PHONE: _____

ADDRESS: _____

Children attending St. Mary's for whom you are seeking assistance funds:

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Others in your household for whom you are the principal means of support and their relationship to you:

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

INCOME: Include with this application a copy (front and back) of your current year's 1040 Federal Income Tax Return.

The tuition for our family for this year is \$ _____.

Any other information you feel that has a bearing on your ability to pay tuition at St. Mary's.

SIGNATURE: _____

DATE: _____

(For Committee Use Only)

This family's application has been approved for \$_____.

Signature: _____

Date: _____

