



ST. MARY'S SCHOOL

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: _____

Updated 7/10