



Application for Tuition Assistance 2016/2017

STUDENT INFORMATION List only students who will be enrolling in St. Bernardine of Siena School for 2016-2017			
First Name:	Middle Initial:	Last Name:	
Street Address:			
City:	State:	Zip:	Birth Date:
Sex:	Grade Entering in Fall 2016:		
First Name:	Middle Initial:	Last Name:	
Street Address:			
City:	State:	Zip:	Birth Date:
Sex:	Grade Entering in Fall 2016:		
First Name:	Middle Initial:	Last Name:	
Street Address:			
City:	State:	Zip:	Birth Date:
Sex:	Grade Entering in Fall 2016:		
First Name:	Middle Initial:	Last Name:	
Street Address:			
City:	State:	Zip:	Birth Date:
Sex:	Grade Entering in Fall 2016:		

Has your family received tuition assistance from St. Bernardine of Siena School in previous years?

_____ Yes _____ No

List year(s) _____, _____, _____, _____

FAMILY INCOME		
ANNUAL SOURCE OF INCOME	PARENT/GUARDIAN A	PARENT/GUARDIAN B
Income Tax Filing Status for tax year _____:	Single / Married Joint / Married Filed Separately / Head of Household / Do not File	Single / Married Joint / Married Filed Separately / Head of Household / Do not File
Annual Income (before taxes)	\$	\$
Cash Income	\$	\$
SSI (Social Security)	\$	\$
Supplemental SSI	\$	\$
Death Benefits SSI	\$	\$
Pension	\$	\$
Welfare/TANF/AFDC	\$	\$
Food Stamps	\$	\$
Unemployment	\$	\$
Disability	\$	\$
Alimony	\$	\$
Child Support/Family Support	\$	\$
Parent/Guardian college/university student aid, grants or scholarships	\$	\$
Income from Real Estate/Rental or Income Property	\$	\$
Income from Business/Farm(s)	\$	\$
Annual distribution from Investments (Trust funds, CDs, Stocks, IRAs, 401Ks, etc)	\$	\$
Total Assets/Savings	\$	\$

FAMILY EXPENSES

Where does this family live?	Own Home / Rented Home/Apartment / Live in the home of Parent/Relative/Friend / Shelter/Temporary Housing / Federal Housing / Section 8 Housing / Other _____		
Monthly Mortgage or Rent \$ _____	How much do you contribute towards the monthly mortgage or rent? \$ _____	Is your home currently in foreclosure or short sale? Yes _____ No _____	
Car Information	Make	Year	Monthly Car Payment

Please use the space below to explain why you need tuition assistance or special circumstances to help us understand your current financial need.

St. Bernardine of Seina School Tuition Assistance Guidelines

- 1. Tuition assistance is granted for the period of one academic year. Families needing further assistance must submit a new application annually.
- 2. Applications for tuition assistance are reviewed annually and assistance is distributed based on the number of families who apply, level of need and available resources that the school has set aside for this purpose.
- 3. Applications must include all required proof of income in order to be accepted.
- 4. Family involvement in St. Bernardine Parish is given highest consideration in awarding tuition assistance.

One of the following must be submitted for proof of income:

- 1. The year's current and completed income tax return OR
- 2. Last year's completed income tax return plus this year's W-2's
- 3. If a family member has not worked any time during the last 12 months, **they must provide the school with a formal and legal notice/action of layoff status, disability benefits, social security benefits, unemployment benefits, and/or welfare benefits, and court order of legal separation/divorce with terms of child or spousal support.**
- 4. If another form of proof of income is used, please explain in detail (Example: check stubs, letter from employer with notarized affidavit, etc.)
- 5. Families with change of status due to separation or divorce must provide the court order of legal separation/divorce with terms of child or spousal support.

*Please note that the committee may request additional documentation.

Please return application and all supporting documents in sealed envelope to the school office with, Confidential, Attention Principal written on the envelope.

Your signature below indicates that you have read and understand the St. Bernardine of Siena School guidelines, the that information provided on this application is true, accurate and complete, that you have provided legal proof of income, that you understand that all information on this application will be verified and that any missing or unsubstantiated information will be caused for denial of tuition assistance.

Signature: (Parent/Guardian A)

Date

Signature: (Parent/Guardian B)

Date