

Our Lady of the Gulf Catholic School
Tuition Assistance Application
for Family



2019 - 2020

↓ FOR SCHOOL OFFICE USE ONLY ↓

Applicant #: _____

<p>Date Application Received: _____</p> <p><input type="checkbox"/> Complete <input type="checkbox"/> Incomplete <input type="checkbox"/> Returned for info</p>	<p>TA Review Round: _____</p> <p>Actual Tuition: _____</p> <p><input type="checkbox"/> Approved TA Amount \$ _____</p> <p><input type="checkbox"/> Disapproved</p>
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**OUR LADY OF THE GULF CATHOLIC SCHOOL
TUITION ASSISTANCE APPLICATION
CONFIDENTIAL INFORMATION**

Application package must include:

- Completed Tuition Assistance Application Form
- Completed Registration Form for each student
- Copy of previous year's **Federal Income Tax Form 1040**

List Students to attend Our Lady of the Gulf School Next Fall

<i>Name</i>	<i>Grade</i>	<i>Name</i>	<i>Grade</i>

Father/Guardian

Mother/Guardian

Last:		First:		Last:		First:		
Address:				Address:				
Work Phone:		Home Phone:		Work Phone:		Home Phone:		
<input type="checkbox"/> Deceased	<input type="checkbox"/> Separated	<input type="checkbox"/> Divorced	<input type="checkbox"/> Deceased	<input type="checkbox"/> Separated	<input type="checkbox"/> Divorced	<input type="checkbox"/> Deceased	<input type="checkbox"/> Separated	<input type="checkbox"/> Divorced

Father/Guardian Employment Record

Mother/Guardian Employment Record

Employer:		Employer:	
If unemployed, most recent employer:		If unemployed, most recent employer:	
Date last employed:		Date last employed:	

OTHER INCOME – Report on Annual Basis

	\$		\$
Non-Taxable Pensions	\$	Disability	\$
Workmen's Compensation	\$	V.A. Benefits	\$
Alimony	\$	Child Support	\$
Welfare (AFDC/ADC)	\$	Food Stamps	\$
Social Security	\$	Other Non-Taxable Income	\$
Unemployment Benefits	\$	Trust Funds	\$
		Any Other Income	\$

Within the PRIMARY household of student(s):

Name of adult <i>financially</i> accountable: <small>(*Income tax information required from this person)</small>	Number of adults in household:	Number of children (<18 years old) in household:
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Statement of Need for Tuition Assistance
(Include Specifics regarding special circumstances and/or special needs)

Is student Catholic? _____ Yes _____ No

If Catholic, are you a Parishioner or Non-Parishioner? (**see below for details**): _____ Yes _____ No

**** Parishioners must be registered with OLG Church Parish and have contributed (tithed) a minimum of \$300 during Jan 1st to June 1st of the current year (2019).***

SIGNATURE(s)

I believe that the information in this form is true and accurate.

Father/Guardian:

Date:

Mother/Guardian:

Date: