

# St. Mary Parish

Manchester, IA 52057

## Application for Local Tuition Assistance 2018-19

Return completed form to: Tuition Committee  
St. Mary Parish  
119 West Fayette Street  
Manchester, IA 52057

Due Date September, 2018

<u>Student(s) name</u>	<u>Grade</u>	<u>Program Tuition</u>	<u>Assistance Requested</u>	<u>Educational Program*</u>
------------------------	--------------	------------------------	-----------------------------	-----------------------------

<u>Name of Parent(s)/Guardian(s)</u>	<u>Address</u>	<u>Telephone</u>	<u>Marital Status**</u>
--------------------------------------	----------------	------------------	-------------------------

### PLEASE ANSWER/COMPLETE THE FOLLOWING QUESTIONS/INFORMATION:

- If parents are divorced or separated, who has legal custody of applicant(s)? \_\_\_\_\_ Mother \_\_\_\_\_ Father
- Does your family use SCRIP to earn a 1% tuition credit (available to families with students in all educational programs within the Cluster)? \_\_\_\_\_ Yes \_\_\_\_\_ No
- Did you family apply for assistance through the Archdiocesan STO Program (School Tuition Organization) for the 2017-18 school year (available to families with students attending St. Mary School)? \_\_\_\_\_ Yes \_\_\_\_\_ No
- **Qualifying Information (mark all that currently apply to you or anyone in your immediate family):**  
\_\_\_\_\_ Food Stamps \_\_\_\_\_ LIHAP (Low Income Heating Assistance Program)  
\_\_\_\_\_ Head Start Program \_\_\_\_\_ Title 19 Medical Card

*If you were not able to mark any of the above programs, then please provide us with the number of persons in your household and your Adjusted Gross Income (AGI) from your 2017 Federal income tax return.*

Number of persons residing in your household \_\_\_\_\_ 2015 AGI – Line 37 Form 1040 \_\_\_\_\_ \*\*\*

Or Line 21 Form 1040A \_\_\_\_\_ \*\*\*

Or Line 4 Form 1040EZ \_\_\_\_\_ \*\*\*

**Certification:** I certify that the information provided above is true and correct. I hereby authorize St. Mary Tuition Committee to contact the administrative agency to verify my Qualifying Information.

Signature \_\_\_\_\_ Date \_\_\_\_\_

#### \*Educational Program:

Religious Education (Grades K through 6)  
St. Mary Elementary School (Grades JK through 6 and Pre-school)  
St. Paul School of Religion (Grades 7 through 12)  
Sacramental Prep – 1<sup>st</sup> Reconciliation/Communion or Confirmation  
IMPACT Training

#### \*\*Parent/Guardian Marital Status:

Single Deceased  
Married Separated  
Widowed Divorced

\*\*\*A copy of your most recent income tax return may be requested to verify information provided.

**Blank or unclear information will constitute an incomplete application and will not be considered.**

**All applications for Tuition Assistance remain confidential.**