



Our Lady of the Angels

TUITION ASSISTANCE APPLICATION

(Incomplete applications will not be considered)

FATHER

MOTHER

Name _____
Address _____
Phone _____

STUDENTS ATTENDING OUR LADY OF THE ANGELS OR CATHOLIC HIGH SCHOOL
(5 points per student)

Name _____	Birth Date _____	OLA	LCHS	YCHS
Name _____	Birth Date _____	OLA	LCHS	YCHS
Name _____	Birth Date _____	OLA	LCHS	YCHS
Name _____	Birth Date _____	OLA	LCHS	YCHS

Additional Children

Name _____	Birth Date _____
Name _____	Birth Date _____
Name _____	Birth Date _____

Parish in which you are registered _____ City _____
Attendance at Sunday Mass? _____ Active Practice of Catholic Faith? _____
(5 points) Use of Church Envelopes? _____ Envelope Number _____
(5 points) Present Service to Parish _____
In What Specific Way _____

(10 points) Do You Purchase Our Lady of the Angels Grocery Certificates/Scrip? YES NO
Weekly _____ Monthly _____

<u>NAME</u>	<u>BIRTH DATE</u>	<u>EMPLOYER'S NAME</u>	<u>GROSS ANNUAL INCOME</u>
Father _____	_____	_____	_____
Mother _____	_____	_____	_____
Guardian _____	_____	_____	_____
Student _____	_____	_____	_____
			TOTAL ANNUAL INCOME _____

OTHER MONTHLY FINANCIAL ASSISTANCE

Unemployment Compensation	\$ _____
Disability Pay	\$ _____
Public Assistance	\$ _____
Food Stamps	\$ _____
Rent Subsidies	\$ _____
Heat Subsidies	\$ _____
Other	\$ _____

VEHICLES OWNED

Year _____	Make _____	Model _____
Year _____	Make _____	Model _____
Year _____	Make _____	Model _____

IDENTIFY THOSE SUPPORTED ON INCOME STATED ABOVE: (NOT PREVIOUSLY LISTED)

NAME _____ AGE _____ RELATIONSHIP _____
NAME _____ AGE _____ RELATIONSHIP _____
NAME _____ AGE _____ RELATIONSHIP _____
NAME _____ AGE _____ RELATIONSHIP _____

MONTHLY EXPENSES

Monthly Mortgage or Rent \$ _____
Monthly Vehicle Payment \$ _____
Monthly Vehicle Payment \$ _____
Monthly Utility Expenses \$ _____
Monthly Medical Expenses \$ _____
Monthly Credit Card Payment _____
 Credit Card \$ _____
 Credit Card \$ _____
 Credit Card \$ _____
 Credit Card \$ _____
College Expenses \$ _____
Other Major Expenses \$ _____
Explain Briefly _____

FINANCIAL AID IS REQUESTED BECAUSE (Check Where Appropriate and Explain Briefly)

_____ Medical Expenses _____
_____ Unemployment Parent/Guardian _____
_____ Other Children in College _____
_____ Other Children in Parochial School _____
_____ Other (Please Specify) _____

We can pay \$ _____ per month for my child/ren to attend Our Lady of the Angels School.

Signature of Parent _____ Date _____

THIS FORM MUST BE RECEIVED IN THE SCHOOL OFFICE BY FRIDAY MARCH 29th

FOR OFFICE USE ONLY

RECOMMENDATIONS _____
DATE _____

END OF YEAR EVALUATION

PAYMENT COMPLETE _____
VERIFIED BY _____
DATE _____

February 9, 2008

Dear Parents and Guardians,

The best source of tuition assistance is the **Neumann Scholarship**. If your family does not meet the eligibility requirements you may request FOCUS money. Attached is a tuition assistance application for FOCUS. Please understand that it may not always be possible to give you the assistance that you request. I would like to share the manner in which the assistance has been given in the past.

We have not been notified by the Diocese as to the amount of the FOCUS Grant. Therefore assistance can not be determined until we receive the confirmation, which may not be until the end of April. The amount of assistance is written on the tuition payment book you receive the end of June.

If the assistance you receive from FOCUS does not provide you with the necessary help, your next step is to contact your pastor. The pastor will then notify the school.

A point system is used to disperse FOCUS money. Anyone requesting assistance will be given a base amount. This will be dependent on the number of requests and the amount of money received. There are certain areas of the application that have been assigned points. Applicants will receive a designated amount for every five points.

Please understand the School Board and Pastors make every effort to help those families that have a genuine financial need. We encourage you to purchase Food Certificates and Scrip that will decrease your tuition and support Our Lady of the Angels budget.

Please feel free to contact the school office with any questions.

ANY APPLICATIONS RECEIVED AFTER **March 29th** WILL NOT BE
CONSIDERED.