

SCHOLARSHIP APPLICATION

For School Year _____

Parent's or Guardian's Name _____

Student's Name(s) and grade(s) _____

Address _____

Phone _____ Email _____

1. Please state why you are in need of tuition assistance for the upcoming school year (attach separate sheet if necessary):

2. How much tuition are you able to pay each month? _____

IF YOU HAVE A COMPLETED APPLICATION ON FILE FOR TUITION ASSISTANCE WITH THE DIOCESE OF WHEELING-CHARLESTON FOR THE UPCOMING SCHOOL YEAR, NO FURTHER FINANCIAL INFORMATION IS NEEDED. PLEASE GO TO STEP 11 AND SIGN FORM.

3. Who is responsible for paying student's tuition? (list all names) _____

4. Did the responsible party (or parties) file a tax return for the prior calendar year? _____ yes _____ no

5. Current employment status:

Father _____ Full time _____ Part time _____ not employed
Mother _____ Full time _____ Part time _____ not employed
Other responsible party _____ Full time _____ Part time _____ not employed

6. Size of Household Number of Adults _____ Number of Children (up to 12th grade) _____

7. Does anyone in the household receive any of the following nontaxable income:

Child Support	Amount _____	_____per week	_____per month	_____annually
Social Security	Amount _____	_____per week	_____per month	_____annually
Disability Benefits	Amount _____	_____per week	_____per month	_____annually
Food Stamps	Amount _____	_____per week	_____per month	_____annually
Workers Compensation	Amount _____	_____per week	_____per month	_____annually
Tuition support or anticipated support from others	Amount _____	_____per week	_____per month	_____annually
Other financial assistance	Amount _____	_____per week	_____per month	_____annually

8. Are you anticipating a change to household income in the coming year? Please explain:

9. Do you _____ own or _____ rent your primary residence? Monthly payment _____
Do you own a second home? _____

10. Complete all items that apply to your household and explain:

Significant medical expenses _____

Tuition expense at other schools _____

Monthly loan payments (excluding home mortgage) _____

Other significant financial obligations _____

PLEASE ATTACH COPY OF PRIOR YEAR FEDERAL TAX RETURN AND COPIES OF FORM W-2.

11. Information submitted on this form will remain confidential and is subject to review by the school's Financial Aid Committee.

Applicant's Signature

Date of Application

St. Michael Parish School
1221 National Road
Wheeling, WV 26003
304.242.3966
www.stmikesparishschool.org