

The Good Shepherd Fund

ST. ROSE-McCARTHY SCHOOL
1000 N. Harris St., Hanford, CA 93230
(559) 584-5218

CONFIDENTIAL TUITION ASSISTANCE APPLICATION

Due April 15, 2017

The Good Shepherd Fund is intended to help NEW families/students (or current recipients of The Good Shepherd Fund) attend St. Rose-McCarthy School (SRM) who may not otherwise be able to do so due to limited financial resources. Tuition assistance is awarded in the form of tuition reduction grants. The amount of each award is based upon the demonstrated financial need of the student's family in relation to all other families applying. SRM strives to distribute as much financial assistance as possible within the constraints of our limited resources.

All families/students receiving Good Shepherd tuition assistance must meet the following criteria:

- Families are responsible for paying the registration fee for all students accepted.
- Students must maintain an unweighted 2.0 GPA.
- Students must maintain high standards of deportment and attendance.
- Students must be involved in at least one major extra-curricular activity.
- Families must be current with tuition, parent participation hours, and obligations as specified in SRM's contract and the Parent/Student Handbook.

Failure to meet any of the aforementioned criteria will result in the family forfeiting their ability to apply for tuition assistance the following year.

The following must be submitted with your application:

- A copy of your 2015 or 2016 signed Income Tax Return.
- Copies of last pay stub (both parents).
- Copy of SRM contract and information update form.

PLEASE NOTE: Incomplete applications will not be accepted.

Families applying for tuition assistance will be notified of acceptance by May 15, 2017.

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Students new/attending St. Rose-McCarthy School:

<u>Last Name</u>	<u>First Name</u>	<u>Grade</u>	<u>Religion</u>

All other dependents:

<u>Name</u>	<u>Age</u>	<u>School</u>	<u>Tuition Amount</u>	<u>Resides with you? (Yes/No)</u>

<i>Father, Stepfather and/or Guardian Information</i>			
Name:			
Email:	Home Phone:	Cellular Phone:	
Address:			
City:	State:	Zip Code:	
Please circle: Own home or Rent home	Mortgage/Rent per month: \$	How long at this address:	
Employer:		How long:	
Employer address:			
City:	State:	Zip Code:	
Employer phone:	Employer Email:		
Position:	Please circle: Hourly or Salary	Annual income:	

<i>Mother, Stepmother and/or Guardian Information</i>		
Name:		
Email:	Home Phone:	Cellular Phone:

