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, 2019

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:

- Student must be registered for the 2019-20 school year at SRM.
- 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 last year's Income Tax Return.
- Copies of work pay stub for the last two months (all who are responsible for payment of tuition).

PLEASE NOTE: Incomplete applications will not be accepted.

Families applying for tuition assistance will be notified of acceptance by May 15, 2019.

THE GOOD SHEPHERD FUND CONFIDENTIAL TUITION ASSISTANCE APPLICATION 2019-20

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>Sch</u>	n <u>ool</u>		<u>Tuition</u> <u>Amount</u>	Resides with you? (Yes/No)		
Father, Stepfather a	nd/or G	ardian l	nformation					
Name:								
Email:		Home Ph	one:		Cellular Phone:			
Address:								
City:		State:		Zip Code:				
Please circle: Own home or Rent home		Mortgage \$	e/Rent per month:	_	How long at this address:			
mployer:			How lo	w long:				
Employer address:								
City:		State:			Zip Code:			
Employer phone:			Employer Email:					
Position:		Please cir	ase circle: Hourly or Salary		Annual income:			
Mother, Stepmother	and/or	Guardian	Information					
Name:								
Email:		Home Ph	Home Phone:		Cellular Phone:			

Mother, Stepmother and/or Guardian Information continued										
Address:										
City:	State:	State:		Zip Code:		le:				
Please circle: Own home or Rent home	Mortgage,	Mortgage/Rent per month: \$		How long at this address:		ng at this address:				
Employer:		Υ		How long:						
Employer address:										
City:	State:	State:		Zip Code:						
Employer phone:		Employ	yer Email:							
Position:	Please circ	Please circle: Hourly or Sala		y Annual income:		income:				
	1									
Monthly Expenses										
Credit Cards	Current: Yes	/No	Current Balan		ce	Monthly Payment				
Auto Loans	Current: Yes	/No	Current Balance		ce	Monthly Payment				
Other loans, debts, or obligations	Current: Yes/No		Current Balance		ce	Monthly Payment				
Obligations										
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Other sources of income ar		ı.e., rei	ntal prope							
Description		Amount per month or value								
Applicant's Signature	Dat	<u>—</u>		plicant'	's Siana	ature Date				
Applicant o Olynatulo	Dat		JO AP	Pilouit	July	Liaro Dale				