



St. Edward
CATHOLIC CHURCH AND SCHOOL

FRIENDS OF SAINT EDWARD SCHOLARSHIP FUND

TUITION ASSISTANCE APPLICATION

Name(s) of child(ren) attending St. Edward School:

Grade level for 2020 – 2021:

The reason(s) for requesting tuition assistance:

The total amount of tuition assistance you request \$ _____

Your full request may not be available based on the number of applications received and/or funds available.

Will you be requesting tuition assistance next year? Yes No Not sure

In what way(s) could you assist the school in lieu of receiving assistance?

If you received tuition assistance last year or in the past did you follow through with your volunteer assistance?

Yes No

Parent Signature: _____ Date: _____

Please submit a copy of your last year’s income tax return with this application and return it to the Church Office by May 25th. You will be notified as to the result of your request by June 15th.

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Institutional Use (Please do not complete)

Amount Granted: _____

Pastor's Signature: _____ Date: _____

Notes: