



Cathedral of St. John the Evangelist

Dear Current and Future BK parents,

We are excited that you will be sending your child to Bishop Kelly High School for the upcoming academic year. Your child will not only receive an excellent education but also grow in the love of Jesus and our Catholic faith.

St. John's Cathedral has produced and attached the **ONLY** Parish Support Application that will be accepted for the next school year. Please **DO NOT** use the application from Bishop Kelly for your Parish Support application as it will not be accepted.

Please carefully read the application, specifically the parts in "**RED**". We invite you to begin now until June 15th to follow the guidelines stated in the application; as we will use the date range of January 1 of the prior year, through June 15 of the current year (18 months) when we make our determination of your application. **June 15 of the current year is the hard deadline** and there will be no exceptions.

May God abundantly bless you and your family.

Sincerely in the Lord,

Fr. Mariusz Majewski

Fr. Mariusz Majewski
Rector

Deacon Daniel Gamboa

Deacon Daniel Gamboa
Administrator

**RETURN FORM TO PARISH OFFICE
on or before end of day JUNE 15th**

(Submit to your Parish at the time you submit
the Tuition Application to Bishop Kelly)

Student's Last: _____ First: _____

New BK Student ☐ Returning BK Student ☐ Grade: _____

Mass Attended: _____ Registration # _____

**ST JOHN'S PARISH SUPPORT APPLICATION
for Bishop Kelly High School
20____—20____ School Year**

**Every application turned in AFTER the June 15th deadline
WILL NOT be considered, NO EXCEPTIONS
INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED
PLEASE FILL IN ALL LINES**

ST. JOHN'S OFFICE USE ONLY

This form must be completed if you are seeking the Parish Supported Tuition Assistance of \$800 per child. This **IS** the **ONLY** form accepted for the Registered families of St John's Cathedral. Each child requires a separate form and must be completed and returned to ST JOHN'S ON or BEFORE end of business day June 15th to be considered to receive the Tuition Support. The Rector and Administrator, or their delegates, will verify your registration and participation in our parish before approving your eligibility for tuition support payment to Bishop Kelly. You must fulfill all the minimum requirements of St. John's below to be considered eligible for the tuition support.

APPLICANT AND CO-APPLICANT INFORMATION

Applicant: Parent or Guardian

Co-Applicant: Spouse or Other Adult Living in Household ☐ N/A

Name _____	_____
Address _____	_____
Home Phone _____	_____
Cell Phone _____	_____
E-mail Address _____	_____

RELATIONSHIP TO STUDENT:

Father ☐ Mother ☐ Stepfather ☐ Stepmother ☐ Legal Guardian ☐

Father ☐ Mother ☐ Stepfather ☐ Stepmother ☐ Legal Guardian ☐

DIVORCED OR SEPARATED PARENTS: Form is to be completed by the parent responsible for the student's educational expenses. Shared responsibility requires an application from both parents.

The following criteria is used to assist the Rector, Administrator and/or their delegates in determining participation in the life of our Parish.

COMPLETION OF APPLICATION DOES NOT ASSUME GUARANTEE

BELOW ARE THE MINIMUM REQUIREMENTS, EACH BOX MUST BE CHECKED.

- ☐ The student is a baptized Catholic, **AND**
- ☐ One of the parents or legal guardians of the student is a registered member of the parish by December 31st before the qualifying academic year; **AND**
- ☐ The parent or legal guardian is a supportive parishioner of the parish. This support is exemplified by:
 - ☐ Verifiable weekly participation in the Holy Mass, consistent weekly financial support of the parish shown through consistent weekly use of parish envelopes. (**Online contributions ONLY acceptable, if an Empty Contribution envelope is received in Mass Collection**) **AND**
 - ☐ Current participation in a parish ministry (i.e. music, liturgical ministry, religious education, adult bible study, food bank), pastoral council or parish committee, or a parish organization. Fulfillment of any required volunteer hours at either the parish's School or Bishop Kelly High School does not fulfill this requirement. **List volunteer areas below:**

SIGNATURES: By signing, I (we) declare that I have read this form in its entirety and that the information provided is true and complete.

Parent or Guardian (Applicant): _____ Date: _____

Spouse (Co-Applicant): _____ Date: _____

**Thank you for completing this application and submitting by no later than June 15th. All information is kept confidential.
You may be contacted if clarification is needed. Notice of approval/denial decision will be sent to you by September 1st.**