Blessed Sacrament School Endowment Fund Application 2020-2021 School Year

Confidential This form is for Administration Use only

Student Name:	Gr.:	D.O.B:	
Student Name:	Gr.:	D.O.B:	
Student Name:	Gr.:	D.O.B	

Application for the year 2020-2021

NEW RENEWAL

Application for Financial Aid

All questions must be answered completely before your request can be given consideration

CONFIDENTIAL

l .	Name of person responsible for tuition:					
2.	Home Address:					
3.	Mother's Name and Address:					
4.	Father's Name and Address:					
5.	If either parent is deceased, please indicate:					
ó.	List brothers and sisters who live at home, the school they attend or their occupation if they work:					
	Name of child Age School/College Tuition paid Aid received by by parent parent					
7.	Please list other dependents if any. In case of dependents living outside your home, please indicate approximate amount of financial assistance you receive each year.					
8.	Aside from your family obligations, do you have any commitments which should be considered in order to obtain a fair estimate of your financial situation (mortgage payments or other?) If yes, please give details.					

Business Address: Name of Firm or Employer: Business Address: 11. Please give the following amounts before deductions security, etc. a. Father's Weekly Salary: b. Mother's Weekly Salary: 12. Other income besides salary: 13. Do you own your own home? Walue of Home: Mortgage Payme 14. Do you own other property: 15. If you are renting, amount per month: 16. Value of any stocks and/or bonds: 17. Please list all automobiles in your family:		f Firm or E	Employer:	Engly suit-	
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18. Are there other funds that might be applied to the students savings, legacies, trust funds, educational insurance, a			_		

. In view of the financial circumstances outlined above, what minimum tuition reduction do you need per year:							
Religion of Father:Religion of Mother:							
Parish in which you are registered:							
If Blessed Sacrament Church, budget number:							
State your reasons for requesting this tuition reduction, adding any additional facts that will help in evaluating your request.							
1							
hereby state that all information is to the best of our knowledge, true and accurate.							
Signed: Mother:							
Father:							
Date:							