

## St. Cecilia Local Tuition Scholarship Assistance Form

St. Cecilia strives to make Catholic education available to all students who desire it. Therefore, in addition to assistance from other sources, St. Cecilia provides some local tuition assistance scholarship awards to families who demonstrate financial need.

We believe that Catholic education is a tremendous gift to give to your children, and its rewards are many. It is expected that families make Catholic education a priority in their financial planning to provide this opportunity. Nonetheless, it can create financial struggles for families.

If you feel your FACTS student tuition assistance award is inadequate to allow you to afford to attend St. Cecilia School for the 2019-20 school year, please complete the following confidential form and submit it to the school office by May 31, 2019. The request will be reviewed by the St. Cecilia Finance Committee over the summer.

Parent(s) or Guardian(s): \_\_\_\_\_

Student Name(s)/Grade(s): \_\_\_\_\_

\_\_\_\_\_

Home Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Total School Tuition for 2019-2020: \$ \_\_\_\_\_

Has your family completed an STO application through FACTS for 2019-20?

\_\_\_\_ Yes      \_\_\_\_ No      If Yes, Amount Received \$ \_\_\_\_\_

Other grants or donations received: \$ \_\_\_\_\_

Remaining tuition balance: \$ \_\_\_\_\_

What amount of the projected tuition bill for 2019-20 do you feel your family can sacrificially commit toward the education of your student(s)?

\$ \_\_\_\_\_ per student or \$ \_\_\_\_\_ total for the school year

Amount of Local Tuition Scholarship Assistance requesting: \$ \_\_\_\_\_

Use the space below to describe the circumstances that prompt your request for a change in your tuition assistance award. This section is extremely important. Use the back or additional sheets if more space is required.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I understand this information will be kept confidential. I also understand that this request will not be considered unless this form is complete. Further, I understand that the Committee reserves the right to request additional information if needed.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_