



## Our Lady of the Lakes Catholic School Tuition Angels Grant Application

| Family Contact Information |  |                |  |
|----------------------------|--|----------------|--|
| Parents' Names:            |  |                |  |
| Street Address:            |  |                |  |
| City:                      |  | Zip Code:      |  |
| Phone:                     |  | Email Address: |  |

*If the parents are separated or divorced, please indicate in "Additional Information" section and provide additional address information.*

| Children Information |     |                  |       |
|----------------------|-----|------------------|-------|
| Name                 | Age | School Attending | Grade |
|                      |     |                  |       |
|                      |     |                  |       |
|                      |     |                  |       |
|                      |     |                  |       |
|                      |     |                  |       |
|                      |     |                  |       |
|                      |     |                  |       |

List all other scholarships or grants you have applied for during this school year: *(attach additional sheets if needed)*

| Grant Name                          | Received? | Amount Received |
|-------------------------------------|-----------|-----------------|
|                                     | Yes / No  |                 |
|                                     | Yes / No  |                 |
|                                     | Yes / No  |                 |
| <b>Total amount of other grants</b> |           | <b>\$</b>       |

| Financial Information |          |            |
|-----------------------|----------|------------|
| Parent Name           | Employer | Occupation |
|                       |          |            |
|                       |          |            |

Total income from wages last year:     \$ \_\_\_\_\_

Prior year Adjusted Gross Income as reported on your IRS 1040, 1040A or 1040EZ:     \$ \_\_\_\_\_

| Unusual Circumstances   |
|---|
| <i>(check all that apply to your situation within the past 12 months)</i> |

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Loss of job               | <input type="checkbox"/> Change in family living status | <input type="checkbox"/> Medical expenses  |
| <input type="checkbox"/> Recent separation/divorce | <input type="checkbox"/> Bankruptcy                     | <input type="checkbox"/> Death in Family   |
| <input type="checkbox"/> Change in work status     | <input type="checkbox"/> Income Reduction               | <input type="checkbox"/> Other <i>(explain in "Additional Information" on next page)</i> |
| <input type="checkbox"/> Child support reduction   | <input type="checkbox"/> Illness or injury              |  |

After reviewing your finances, how much do you feel you can afford to pay each month toward tuition?

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Please provide additional information about your circumstance which will assist the scholarship committee:

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**Additional Information:**

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I/We declare that the information on this form is true, correct, and complete to the best of my/our knowledge.

**Parents' Signatures:**

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Signature

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Date

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Signature

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Date

**Please return the completed application to:**

The Office of Admissions  
Our Lady of the Lakes Catholic School  
5495 Dixie Highway  
Waterford, MI 48329