



# Application for Tuition Assistance

## 2011/2012

### School Office Use Only

School Code: \_\_\_\_\_

School Name: \_\_\_\_\_

**Please fill out this application completely, sign and return to your school with required proof of income.**

#### STUDENT INFORMATION

First Name:		Middle Initial:	Last Name:	
Street Address:				
City:		State: CA	ZIP:	Birth date: ____/____/____
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Grade Fall 2011:	School Currently Attending:		Type of School: <input type="checkbox"/> Catholic <input type="checkbox"/> Public <input type="checkbox"/> Charter <input type="checkbox"/> Home School <input type="checkbox"/> Other _____
Ethnic Background (Optional):	<input type="checkbox"/> Asian <input type="checkbox"/> Afro American <input type="checkbox"/> Caucasian/White <input type="checkbox"/> Filipino <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Native American <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Multiple Ethnicities <input type="checkbox"/> Declined to State <input type="checkbox"/> Other: _____			
Religious Background (Optional):	<input type="checkbox"/> Catholic <input type="checkbox"/> Other Christian: _____ <input type="checkbox"/> No Religious Affiliation <input type="checkbox"/> Declined to State <input type="checkbox"/> Other: _____			

#### HOUSEHOLD INFORMATION

##### Parent/Guardian A

First Name:	Relationship with Student:	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Grandparent <input type="checkbox"/> Step-Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Foster Parent <input type="checkbox"/> Other _____		
Last Name:	Email Address:			
Home Phone Number:		Cell Phone Number:		
Employment Status:	Occupation:	Employer:		
<input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Homemaker <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Disabled <input type="checkbox"/> Full-time student	Work Phone Number:	Number of years with company:		
	If self-employed, type of business:	If self-employed, number of years owned business:		

##### Parent/Guardian B

First Name:	Relationship with Student:	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Grandparent <input type="checkbox"/> Step-Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Foster Parent <input type="checkbox"/> Other _____		
Last Name:	Email Address:			
Home Phone Number:		Cell Phone Number:		
Employment Status:	Occupation:	Employer:		
<input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Homemaker <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Disabled <input type="checkbox"/> Full-time student	Work Phone Number:	Number of years with company:		
	If self-employed, type of business:	If self-employed, number of years owned business:		

Please list all dependents in your family unit (including adults and children):

Name	Age	Relationship with Student	Name	Age	Relationship with Student

**FAMILY INCOME**

ANNUAL SOURCES OF INCOME	PARENT/GUARDIAN A	PARENT/GUARDIAN B
Income Tax Filing Status for 2009:	<input type="checkbox"/> Single <input type="checkbox"/> Married Joint <input type="checkbox"/> Married Filed Separately <input type="checkbox"/> Head of Household <input type="checkbox"/> Do Not File	<input type="checkbox"/> Single <input type="checkbox"/> Married Joint <input type="checkbox"/> Married Filed Separately <input type="checkbox"/> Head of Household <input type="checkbox"/> Do Not File
Annual Income	\$	\$
Cash Income (Not reported)	\$	\$
SSI (Social Security)	\$	\$
Supplemental SSI	\$	\$
Death Benefits SSI/Pension	\$	\$
Welfare/TANF/AFDC	\$	\$
Food Stamps	\$	\$
WIC	\$	\$
Unemployment	\$	\$
Disability	\$	\$
Alimony/Family Support	\$	\$
Child Support	\$	\$
Student Grant and Scholarship Aid	\$	\$
Section 8 Housing	\$	\$
Income from Real Estate	\$	\$
Income from Business/Farms	\$	\$
Investments (Trust funds, CDs, Stocks, IRAs, 401Ks, etc.)	\$	\$
Other: _____	\$	\$

**FAMILY EXPENSES**

Where does this family live?  Own Home  Rented Home/Apartment  Live in your parents home  Shelter/Temporary Housing  
 Federal Housing  Section 8 Housing  Other \_\_\_\_\_

Monthly Housing Mortgage or Rent: \$ \_\_\_\_\_

If you share housing with family or other adults, what portion of the mortgage or rent do you pay? \$ \_\_\_\_\_

Is your home currently in foreclosure or short sale?  Yes  No

Do you own or lease any vehicles?  Yes  No  
 If yes, how many? (Please list all cars below)

Are any vehicles used for business purposes?  Yes  No  
 If yes, explain specifically how the vehicle is being used: \_\_\_\_\_

Make	Model	Year	Own or Lease	Current Car Loan Balance	Monthly Car Payment
			<input type="checkbox"/> Own <input type="checkbox"/> Lease	\$	\$
			<input type="checkbox"/> Own <input type="checkbox"/> Lease	\$	\$
			<input type="checkbox"/> Own <input type="checkbox"/> Lease	\$	\$

Please use the space below to add any comments or explain special circumstances to help us understand your current financial need

### The Catholic Education Foundation (CEF) Guidelines & Restrictions

All Tuition Award Programs are designed to assist students in the Archdiocese of Los Angeles with tuition for enrollment in a Catholic school of the Archdiocese of Los Angeles. The award partially offsets the cost of enrollment in a Catholic school with grants paid directly to the Catholic school after verifying student enrollment in the Fall and the Spring.

All information submitted in this application is confidential and provided for the purpose of determining eligibility for a Tuition Award from the CEF and data research. By signing the application, you grant CEF permission to contact you, the applicant, and the school to verify the information, develop data for educational/ research studies and analysis. You agree to waive and release CEF from all claims in connection with this research. In addition, you grant CEF permission to request and collect additional data, including reading and math test scores, Iowa test scores, PSAT, SAT and AP, ACT test scores and any quantitative and qualitative data on this applicant. CEF will hold this information in confidence and never release the name of the applicant or the family name without your express permission.

### The Following CEF Policy Applies to All Applicants Without Exception:

1. Applicant may not receive more than one tuition award from CEF in a given year.
2. CEF does not accept and will not review any applications that are mailed directly to CEF from applicant.
3. CEF Tuition Awards may not be transferred to another person/student or to any non-participating Catholic school or to another diocese.
4. Students awarded a tuition award who are not enrolled and present in a Catholic school during the CEF's Verification Process will lose his/her tuition award for that school year.
5. The application must be completed and returned to a Catholic school of the Archdiocese of Los Angeles complete with proof of income. Submit application to the Catholic school the applicant is applying to or registered to attend in the Fall. (Exception: Cycle 1:Special 8<sup>th</sup> Grade applicants apply through their Catholic elementary school.)
6. All applications must be submitted by schools on or before the program deadlines.
7. CEF is under no obligation to review or accept any application that is incomplete, illegible, unsigned, lacks pastor or principal's signature and/or has not provided adequate proof of income, has discrepancies or lacks information that makes it impossible to render a funding decision or the application is received after the deadline.
8. CEF annual budget is approved by its Board of Trustees. The annual budget limits the number of tuition awards granted annually. CEF may deny your application due to budget restraints

### CEF Policy for Proof of Income:

1. This year's current and completed income tax returns OR
2. Last year's completed income tax returns plus this year's W-2s
3. If a family member has not worked anytime during the last 12 months, **they must provide the school with a formal and legal notice/ action of layoff status, disability benefits, social security benefits, unemployment benefits, and/or welfare benefits, and court order of legal separation/divorce for spousal or child support.**
4. If another form of proof of income is used, please explain in detail (Example: check stub, letter from employer with notarized affidavit, etc)

### Participating Catholic Schools are under no obligation to submit this application if any of the following Criteria has not been met

1. Family has refused or not provided adequate and/or legal proof of income (Based on CEF Policy for Proof of Income) or information
2. Family income exceeds the CEF income guidelines
3. Student does not meet academic requirements to remain enrolled in the school
4. Lack of student and/or family involvement/volunteer service in school or parish
5. Student is a recipient of another tuition award from CEF.
6. Application submitted past any CEF or school internal deadlines
7. Application does not have Pastor and/or Principal's recommendation signature

Your signature below indicates that you read and understand the CEF Guidelines & Restrictions, that the information provided on this application is true, accurate and complete, that you have provided legal proof of income, that you understand that all information on this application will be verified and that any incomplete, missing or false information on this document, missing signatures or refusal to provide adequate legal proof of income or any pertinent information to process this application will be cause for automatic denial of any tuition assistance from CEF.

Signature (Parent/Guardian A): \_\_\_\_\_

Signature (Parent/Guardian B, if applicable) : \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



**Principal/Pastor  
Recommendation Form  
2011/2012**

**School Office Use Only**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
 School Code: \_\_\_\_\_  
 School Name: \_\_\_\_\_

**INCOME VERIFICATION**

ANNUAL SOURCES OF INCOME	COMBINED VALUES FROM STUDENT APPLICATION (PARENT/GUARDIAN A AND/OR B)
Annual Net Income	\$
Cash Income (Not reported)	\$
SSI (Social Security)	\$
Supplemental SSI	\$
Death Benefits SSI/Pension	\$
Welfare/TANF/AFDC	\$
Food Stamps	\$
WIC	\$
Unemployment	\$
Disability	\$
Alimony/Family Support	\$
Child Support	\$
Student Grant and Scholarship Aid	\$
Section 8 Housing	\$
Income from Real Estate	\$
Income from Business/Farms	\$
Investments (Trust funds, CDs, Stocks, IRAs, 401ks, etc.)	\$
Other: _____	\$

**TOTAL HOUSEHOLD ANNUAL INCOME**

\$

Please check all financial documents used to verify income:

<input type="checkbox"/> Federal/State Income Tax Returns (Year: _____)	<input type="checkbox"/> 2009 W-2 Forms (Year: _____)	<input type="checkbox"/> AFDC/Welfare/TANF
<input type="checkbox"/> Disability	<input type="checkbox"/> SSI (Social Security)	<input type="checkbox"/> SSI Death Benefits
<input type="checkbox"/> Alimony/Family Support	<input type="checkbox"/> Unemployment Benefits	<input type="checkbox"/> Child Support (Wage Garnishment)
<input type="checkbox"/> CEF Notarized Form	<input type="checkbox"/> Other _____	

Please use the space below to add any comments to help us understand this student's financial need: including recent loss of job, disability, etc.

I have reviewed this application, verified the family income using the legal financial documents checked off above and I fully recommend this applicant be considered for a tuition award from the Catholic Education Foundation. I have read and understand the CEF Guidelines & Restrictions. I understand that all information on this application will be verified and that any incomplete, missing or false information, missing signatures, any pertinent information necessary to process this application and/or inadequate legal proof of income will be cause for automatic denial of any tuition assistance from CEF.

Principal/Pastor Signature \_\_\_\_\_ Date: \_\_\_\_\_