



ST. JOSEPH'S SCHOOL

Scholarship Application 2020-2021 School Year

Due April 20th

Family Information

Parent/Guardian (1) _____ Parent/Guardian (2) _____


Address (1) _____

Phone (1) _____ Marital Status _____

Person(s) Responsible to Pay Tuition _____

Complete the following information:

Full name of dependent children	Check if living with parents/guardians	Name of school	Grade in school	Estimated private school tuition, college tuition or daycare expenses paid by parents/guardians for 2020-21 School Year (excluding St. Joe's)
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			

Next Page 

Return completed application & a copy of first 2 pages of your 2019 tax return to Parish or School Office
Attn: Kim Noel

Each Financially Responsible Household Needs To Complete An Application

Financial Information

Income:

Adjusted Gross Income from 2019 tax return. \$ _____

A copy of the first two pages of your 2019 tax return are required with this application.

2020 Monthly net wages from Parent/Guardian (1) \$ _____

2020 Monthly net wages from Parent/Guardian (2) \$ _____

2020 Monthly alimony received if applicable \$ _____

2020 Monthly child support received if applicable \$ _____

2020 Monthly Business Net Income if applicable \$ _____

Household Monthly Debt Payments:

Home Mortgage/Rent \$ _____

Car Payment(s) \$ _____

Student Loan Payment(s) \$ _____

Credit Card Payment(s) \$ _____

Medical Payment(s) \$ _____

Child Support \$ _____

_____ \$ _____

_____ \$ _____

Explain any unusual circumstances that you feel we should consider. Attach additional sheet if needed.

Parent/Guardian(s) Certification:

I declare that the information reported on this form, to the best knowledge and belief, is true, correct and complete.

Signature (1) _____

Date _____

Signature (2) _____

Date _____