SI. MAHY CATHULIC SCHOOL Financial Assistance Application School Year 2022-2023

pplicant Name		Relationship to Student(s)			
pplicant Address			icant Phone No.		
Stude	ents Names		71	Grade Level	
ather's Name		Mother's Name	·		
ccupation		Occupation			
usiness	The state of the s	Business			
Currently Employed	Currently Unemployed	Alimony/Other	Currently Employed		
arents/Guardians are: (please o	check)		III — II		
Married Separ		Single Parent Never Ma	_	w/Widower	
If custody of the child has been which parent has custody?	granted by a court decree as	a result of divorce	or dissolution, _(attach copy of cus	stody papers)	
family registered at St. Mary's Cl	hurch? Yes No				
no, are you registered at another	church? Yes No	If yes, name o	of church		
Please consider me/my family financial need. This informat			In this space, pleas	se explain your	
This application MU	IST be returned to the school	ol office or mailed	to the Pastor by A	pril 16, 2021.	
	Date Received	Office Use Only Appro	ved		
	Current Tuition Balance	Amou	nt		
	1			ı	

2022-2023 REGISTRATION RETURNING ST. MARY STUDENTS

Name	<u>e</u> <u>G</u>	<u>rade</u>	<u>Name</u>		Gra	<u>ide</u>	<u>Name</u>	<u>Grade</u>
								
	CHOOL- Registration egistration Fee: 2-Da			sroom mater 3-Day \$35.00		 rve you	ur child's space in the 5-Day \$45.00 AM	class.
	DE K-8- Registration Registration Fee: \$65.0		p to offse	et costs of fil	ed trips and	religiou	us education materials	i.
	mily has the opportuni				-		-	t St. Mary
ise ✓	which scholarship or f	inancial a	aid you a	re applying f	or by placing	a chec	kmark.	
—] _{Fd}	Choice Traditional (s	chool dis	trict)	FdChc	oice Expansio	n linco	ıme)	
``	choice madicional (5	ciiooi ais	, ci icej		orec Expansio	ii (iiico	,,,,,,	
JP	SN (Jon Peterson Speci	al Needs)	NOSF	(Northwest	Ohio So	cholarship Fund)	
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	atholic Scholarship: Ava	illable to	ramilles	inat contribu	ite time, tale	nt, and	treasure to a local Ca	tholic parish.
	mmunity Scholarshin							
	minumey scholarship.	Availble	to famile	s that contril	bute time an	d talen	t to the St. Mary Scho	ol Community.
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Fin	nancial Aid (comple	te backsi	de of this	form)	bute time an	d talen	t to the St. Mary Scho	of Community.
Fin		te backsi	de of this	form)	bute time an	d talen	t to the St. Mary Scho	of Community.
Fin	nancial Aid (comple Your payment option	by placi	de of this	form)	Mont	nly		•
Fii	nancial Aid (comple	by placi	de of this	form)		nly	Payment Guideline	s and Due Date
Fii	nancial Aid (comple Your payment option	by placi	de of this	form) kmark. Optional \$	Mont	nly ent Payı	Payment Guideline ment is due by August 1	s and Due Date
Fii	your payment option Payment Type Full Payment	by placi	de of this	form) kmark. Optional \$	Mont	nly ent Payi	Payment Guideline ment is due by August 1 rs rate.	s and Due Date 5th and is last
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Fii	your payment option Payment Type Full Payment 10 Monthly Payment	by placi	de of this	form) kmark. Optional \$	Mont	nly ent Payi year Payi star	Payment Guideline ment is due by August 1 rs rate. ments to be made by the ting August 15th - May 1	s and Due Date 5th and is last e 15th of each mo 15th.
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