

2019-2020 REGISTRATION & SCHOLARSHIP FORM

RETURNING STUDENTS

Family Name: _____

Date: _____

List Student(s) and upcoming grade(s)

Please indicate which scholarship(s) you are applying for by placing a checkmark in front of the appropriate option(s):

1. CATHOLIC SCHOLARSHIP: Parents are indicating that their family is registered as members of a Catholic parish and are active in the life of the community, including attending Mass and various parish events.

PRESCHOOL

Registration: 2-Day \$25.00 3-Day \$35.00 5-Day \$45.00
Tuition: \$100.00 / Month \$125.00 / Month \$170.00 / Month

*Monthly payment schedule begins August 15th and runs through May 15th. Payment due the 15th of each month.

GRADE K-8

Registration: \$65.00 Per Student
Tuition: \$4,650.00 per student. Qualified families will receive the Catholic Scholarship.

Actual Cost: I give my time, talent and treasure to _____ parish.
One student: \$3,025.00
Two students: \$4,250.00
Three students: \$4,675.00
Four students: \$5,000.00
Five or more: \$100.00 each additional student

2. COMMUNITY MEMBER SCHOLARSHIP: By applying for this scholarship parents are indicating that their family is not registered in a Catholic parish, but are active in the life of the school community, including attending and assisting at school events and activities as possible.

PRESCHOOL

Registration: 2-Day \$25.00 3-Day \$35.00 5-Day \$45.00
Tuition: \$100.00 / Month \$125.00 / Month \$170.00 / Month

*Monthly payment schedule begins August 15th and runs through May 15th. Payment due the 15th of each month.

GRADE K-8

Registration: \$65.00
Tuition: \$4,650.00 per student. Qualified families will receive the Community Member Scholarship.

Actual Cost: I will volunteer in the following ways:
One student: \$3,840.00 _____
Two students: \$5,550.00 _____
Three students: \$5,975.00 _____
Four students: \$6,300.00 _____
Five or more: \$100.00 each additional student

3. EDCHOICE STATE SCHOLARSHIP: (includes EdChoice AND EdChoice Expansion) I am applying for an EdChoice Scholarship

I/WE OPT TO PAY TUITION ACCORDINGLY

Total Cash - Full Payment (Due by July 31, 2019)

Montly Payment Plan - Ten (10) equally divided tuition payments.

EdChoice State Scholarship

Combination Cash/Monthly Payment - I will pay \$ _____ in cash. Leaving a balance of \$ _____, equaling ten (10) equal monthly payments of \$ _____.

I attest I read, understand and will fully comply with the rules as stated in the Tuition Policy.

Parent/Guardian Signature

Date

Office use only

Date Recieved _____ Reg. Fee Paid _____ Scholarship Approved _____

Principal Approval

Date