



**TUITION ASSISTANCE FORM
2018-2019 SCHOOL YEAR**

A. STUDENT INFORMATION

Children who will be attending St. Norbert School in the fall:

Name of Student: _____ Grade: _____

Name of Student: _____ Grade: _____

Name of Student: _____ Grade: _____

Name of Student: _____ Grade: _____

B. PARENT /GUARDIAN INFORMATION

Father's Name: _____ Mother's Name: _____

Address: _____ Address: _____

City, State, and Zip: _____ City, State, and Zip: _____

Contact Phone: _____ Contact Phone: _____

Employer: _____ Employer: _____

Who is responsible for tuition payments? _____

C. DEPENDENTS

Dependent children who will attend a tuition charging school: daycare, pre-school, elementary school or college in the fall of 2018:

Name: _____ Age: _____

School attending in fall 2018: _____

Tuition: _____ Financial Assistance: _____

Name: _____ Age: _____

School attending in fall 2018: _____

Tuition: _____ Financial Assistance: _____

Name: _____

Age: _____

School attending in fall 2018: _____

Tuition: _____ Financial Assistance: _____

D. FINANCIAL INFORMATION

Household Income *

1. Taxable Annual Household Income from 2017 W-2 Wages: _____

2. Estimated Annual Household Income for 2018 W-2 Wages: _____

3. Other Yearly Income: _____

• Alimony _____

• Child Support _____

• Interest & Dividends _____

• Unemployment _____

• Other _____

Total Household Income: _____

Monthly Expenses

1. Mortgage/Rental Payments _____

2. Real Estate Taxes _____

3. Property Insurance _____

4. Utilities _____

5. Car Loans _____

6. Car Insurance _____

7. Medical/Dental _____

8. Health Insurance _____

9. Other Debt _____

Total Monthly Expenses: _____

*** Attach a copy of 2017 Income Tax Return to this form.**

Please detail below any other pertinent information that you feel should be included.

E. UNUSUAL CIRCUMSTANCES

If you have circumstances which have arisen that you wish to explain beyond the scope of this application, please use the space provided below. Examples would be loss of job or change in work status, recent separation/divorce, college expenses, death in the family, etc.

F. TUITION ASSISTANCE

Amount I/we feel that we can contribute towards tuition at St. Norbert School – Fees are separate and must be paid by family: _____

I/we would be available during the year, work schedule permitting, to volunteer at St. Norbert School to assist in various fundraising or other activities to support the school: **YES:** _____ **NO:** _____

SIGNATURE: _____ **DATE:** _____

PRINTED NAME: _____

RELATION TO STUDENT: _____

All information submitted to St. Norbert School will be held in strict confidence.

Return this form to: **Moira A. Cary, Director of Finance and Operations**
St. Norbert Parish
1809 Walters Ave
Northbrook, IL 60062