



ST. ANTHONY CATHOLIC SCHOOL-HARLINGEN

Tuition Assistance Program Family Application Form (All information will remain confidential)

To be completed by parent or guardian: _____ Date: _____

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

Guardian's Name: _____

Home Address: _____
(Street) (City) (State) (Zip)

Home Phone: _____ Name of Home Parish: _____

Total Yearly Family Income: \$ _____ Income from other sources? Yes _____ No _____

If Yes, please list additional income: _____

COMPLETE THE INFORMATION BELOW INCLUDING ALL DEPENDENT CHILDREN AND OTHERS LIVING IN THE HOUSEHOLD WHO ARE DEPENDENT

Name	Age	School Currently	Grade

This Tuition Assistance Grant is requested for _____ to attend St. Anthony Catholic School.
(Name of Student)

Annual Tuition Charge by School (\$6,000.00 per student)	\$
Annual Family is Able to Pay	\$
Amount of Grant Being Requested	\$

Parent/Guardian

I certify that all information on this application is true. I agree to provide current documentation (i.e. income tax return or W2). I promise to keep current on tuition and fee payments to St. Anthony Catholic School. Further, I understand that the grant awards are the sole responsibility of St. Anthony Catholic School Tuition Assistance and all decisions are final. This is a one-year educational grant with consideration of renewal for subsequent years.

Parent of Guardian's Signature: _____ Date: _____

(Relationship to Student: _____ Mother _____ Father _____ Guardian)

***On a separate paper, please provide the extenuation circumstances that your family feels the need to apply for tuition assistance. Please include special skills and/or services that you can donate to the school as a courtesy for being offered this grant. Due date is on or before April 15, 2024.**

This form must be completed (all highlighted areas), documentation provided, signed and returned to:

Mindy L. Escobar, M. Ed
Principal of St. Anthony Catholic School
1015 E. Harrison
Harlingen, Texas 78550

*****FOR OFFICE USE*****

Pastor

I have reviewed this request and support a tuition assistance grant for the above applicant.

Pastor's Signature: _____ Date: _____

Principal

I have interviewed the candidate and certify that the applicant meets all eligibility criteria for St. Anthony Catholic School. I have reviewed the documentation and verified the need for financial assistance.

Principal's Signature: _____ Date: _____