



# Tuition Assistance Program (TAP)

## CYCLE 3: Elementary School 2010/2011 - Application

<b>School Office Use Only:</b> School Code: _____ School Name: _____ CEF STUDENT ID #: _____
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**Please fill out this application completely, sign and return to your school with required proof of income.**

### Applicant Information:

Student's First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Parent/Guardian E-Mail Address: \_\_\_\_\_

Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex:  Male  Female Grade Fall 2010: \_\_\_\_\_

Ethnic background (Optional): ( ) Native American ( ) Asian ( ) Afro American ( ) Hispanic/Latino ( ) Pacific Islander  
 ( ) Caucasian-White/Other ( ) Filipino ( ) Multi-Racial ( ) Decline to state

Religion (Optional): ( ) Catholic ( ) Other Christian ( ) No Religious Affiliation ( ) Other: \_\_\_\_\_ ( ) Decline to state

### Family Information:

Applicant's legal guardian(s) is/are: (Check all that apply): ( ) Mother ( ) Father ( ) Grandparent(s) ( ) Step-Parent ( ) Guardian ( ) Foster Parent

Total number of persons in your immediate family: \_\_\_\_\_

How many dependent children do you have? \_\_\_\_\_ How many adults in your immediate family contribute financially to the household? \_\_\_\_\_

How many children from your immediate family are not of school age (Infants/Toddlers)? \_\_\_\_\_

How many children from your immediate family are presently enrolled in Catholic elementary school? \_\_\_\_\_ Catholic High School? \_\_\_\_\_  
 Public elementary? \_\_\_\_\_ Public high school? \_\_\_\_\_ Charter/Magnet elementary? \_\_\_\_\_ Charter/Magnet High School? \_\_\_\_\_  
 College/University? \_\_\_\_\_ Work full time? \_\_\_\_\_ Unemployed dependent not in school? \_\_\_\_\_

### Financial Information: (Income)

Parent/guardian 1: Full Name \_\_\_\_\_ ( ) Mother ( ) Father ( ) Grandparent(s) ( ) Step-Parent ( ) Guardian ( ) Foster parent  
 Employment Status: ( ) Employed ( ) Homemaker ( ) Unemployed ( ) Retired ( ) Permanently Disabled ( ) Temporarily Disabled ( ) Student  
 Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
 Annual Salary Net (Adult 1): \$ \_\_\_\_\_ (From 2009 W-2 or 1040 Line 7)

Parent/guardian 2: Full Name \_\_\_\_\_ ( ) Mother ( ) Father ( ) Grandparent(s) ( ) Step-Parent ( ) Guardian ( ) Foster Parent  
 Employment Status: ( ) Employed ( ) Homemaker ( ) Unemployed ( ) Retired ( ) Permanently Disabled ( ) Temporarily Disabled ( ) Student  
 Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_  
 Annual Salary Net (Adult 2): \$ \_\_\_\_\_ (From 2009 W-2 or 1040 Line 7)

Does the parent/guardian of the applicant receive alimony? ( ) YES ( ) NO If yes, how much annually? \$ \_\_\_\_\_

Does the parent/guardian of the applicant receive child support? ( ) YES ( ) NO If yes, total annual received for all children? \$ \_\_\_\_\_

Does anyone in your immediate family receive AFDC/Welfare, Social Security/SSI Death Benefits, Unemployment and/or Disability? ( ) YES ( ) NO  
 If yes, Name: \_\_\_\_\_ (Check one) ( ) AFDC/Welfare ( ) Social Security ( ) Unemployment ( ) Disability How much annually? \$ \_\_\_\_\_  
 Name: \_\_\_\_\_ (Check one) ( ) AFDC/Welfare ( ) Social Security ( ) Unemployment ( ) Disability How much annually? \$ \_\_\_\_\_  
 Name: \_\_\_\_\_ (Check one) ( ) AFDC/Welfare ( ) Social Security ( ) Unemployment ( ) Disability How much annually? \$ \_\_\_\_\_

Do you own any rental/income property? Yes ( ) No ( ) ; Number of units: \_\_\_\_\_ Annual Income: \$ \_\_\_\_\_ Do you live in one of the units? Yes ( ) No ( )

### Financial Information: (Expenses)

Does the parent/guardian of the applicant pay alimony? ( ) YES ( ) NO If yes, how much annually? \$ \_\_\_\_\_

Does the parent/guardian of the applicant pay child support? ( ) YES ( ) NO If yes, how much annually? \$ \_\_\_\_\_

Did the family have any major expenses last year? ( ) YES ( ) NO If yes, what: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Do you own your own home/Condo? ( ) YES ( ) NO Do you rent your home/apartment? ( ) YES ( ) NO Monthly mortgage/rent payment: \$ \_\_\_\_\_

Do you live with or rent a room from parent(s)/extended family member/friend? ( ) YES ( ) NO; If renting, what is your monthly rent payment: \$ \_\_\_\_\_

Do you currently live in a homeless shelter, transitional housing, home for battered women or in your vehicle? Yes ( ) No ( )

Do you own or lease a car/vehicle? ( ) YES ( ) NO, I do not own/lease a car, If yes, please give detailed information below:

Car 1: Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

Car 2: Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_

## The Catholic Education Foundation (CEF) Guidelines & Restrictions

All Tuition Award Programs are designed to assist students in the Archdiocese of Los Angeles with tuition for enrollment in a Catholic school of the Archdiocese of Los Angeles. The award partially offsets the cost of enrollment in a Catholic school with grants paid directly to the Catholic school after verifying student enrollment in the Fall and the Spring.

All information submitted in this application is confidential and provided for the purpose of determining eligibility for a Tuition Award from the CEF and data research. By signing the application, you grant CEF permission to contact you, the applicant, and the school to verify the information, develop data for educational/ research studies and analysis. You agree to waive and release CEF from all claims in connection with this research. In addition, you grant CEF permission to request and collect additional data, including reading and math test scores, Iowa test scores, PSAT, SAT and AP, ACT test scores and any quantitative and qualitative data on this applicant.

### The Following CEF Policy Applies to All Applicants Without Exception:

1. Applicant may not receive more than one tuition award from CEF in a given year.
2. CEF does not accept and will not review any applications that are mailed directly to CEF from applicant.
3. If applicant is a recipient of a *Children's Scholarship Fund* (CSF) grant he/she may not be eligible to apply for a CEF award or receive CEF funding.
4. CEF Tuition Awards may not be transferred to another student or to any non-participating Catholic school or to another diocese.
5. Students awarded a tuition award who are not enrolled and present in a Catholic school during the Fall Verification Process will lose their tuition award for that school year.
6. The application must be returned to a Catholic school of the Archdiocese of Los Angeles complete with proof of income. Submit application to the Catholic school the applicant is applying to or registered to attend in the Fall. (Exception: Special 8<sup>th</sup> Grade High School Awards apply through their Catholic elementary school.)
7. All applications must be submitted by schools on or before the program deadlines.
8. CEF is under no obligation to review or accept any application that is incomplete, illegible, unsigned, lacks pastor or principal's signature and/or has not provided adequate proof of income, has discrepancies or lacks information that makes it impossible to render a funding decision or the application is received after the deadline.
9. CEF annual budget is approved by its Board of Trustees. The annual budget limits the number of tuition awards granted annually. CEF may deny your application due to budget restraints.

### CEF Policy for Proof of Income:

- (1) This year's current and completed Federal income tax returns OR
- (2) Last year's completed Federal income tax returns plus this year's W-2s
- (3) If a family member has not worked at any time during the last 12 months, her or she must provide the school with a formal or legal notice/ action of lavoff status, disability benefits, social security benefits, unemployment benefits, and/or welfare benefits, and/or court order of legal separation/divorce for spousal or child support.
- (4) If another form of proof of income is used, please explain in detail (Example: check stub, letter from employer, etc)

### Participating Catholic Schools are under no obligation to submit this application if any of the following Criteria have not been met:

1. Family has refused or not provided adequate and/or legal proof of income (Based on CEF Policy for Proof of Income) or information
2. Family income exceeds the CEF income guidelines
3. Student does not meet academic requirements to remain enrolled in the school
4. Lack of student and/or family involvement/volunteer service in school or parish
5. Student is a recipient of another tuition award from CEF or of a Children's Scholarship Fund grant
6. Student is a recipient of a Children's Scholarship Fund grant
7. Application submitted past any CEF or school internal deadlines
8. Application does not have Pastor and/or Principal's recommendation signature

Your signature below indicates that you read and understand the CEF Guidelines & Restrictions, that the information provided on this application is true, accurate and complete, that you have provided legal proof of income, that you understand that all information on this application will be verified and that any incomplete, missing or false information on this document, missing signatures or refusal to provide adequate legal proof of income or any pertinent information to process this application will be cause for automatic denial of any tuition assistance from CEF.

Parent/Guardian Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

## (\*Mandatory) School Office Use Only: Verification of Financial Information and Recommendation:

**Total Annual Family Income \$** \_\_\_\_\_ (Please do not indicate zero. This figure should be a total of the net salary income and must include all listed income from first page of application which includes child support/ alimony/SSI, Welfare/Disability from all family members.

Please check all the financial documents and year used to verify family income:

- |  |   |                               |                                      |                               |                               |
|--|---|-------------------------------|--------------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> Completed Federal/State Income Tax Returns -- | <input type="checkbox"/> 2008                             | <input type="checkbox"/> 2009 | <input type="checkbox"/> W-2 Form -- | <input type="checkbox"/> 2008 | <input type="checkbox"/> 2009 |
| <input type="checkbox"/> AFDC/"Welfare" Public Assistance              | <input type="checkbox"/> Social Security                  |                               |                                      |                               |                               |
| <input type="checkbox"/> Disability                                    | <input type="checkbox"/> Unemployment Benefits            |                               |                                      |                               |                               |
| <input type="checkbox"/> SSI Death Benefits of Spouse or Parent(s)     | <input type="checkbox"/> Other(s): (list & explain) _____ |                               |                                      |                               |                               |

**I have reviewed this application, verified the family income using the legal financial documents checked off above and I fully recommend this applicant be considered for a tuition award from the Catholic Education Foundation. I have read and understand the CEF Guidelines & Restrictions above. I understand that all information on this application will be verified and that any incomplete, missing or false information, missing signatures, any pertinent information necessary to process this application and/or inadequate legal proof of income will be cause for automatic denial of any tuition assistance from CEF.**

\* Pastor/Principal Recommendation Signature: \_\_\_\_\_ Date: \_\_\_\_\_