

# Thomas More Prep-Marian and Holy Family Elementary

## 2017-2018 Application for Registration Fee Assistance

Important! Carefully follow instructions. An incomplete application cannot be approved. Complete one application per household.

Return completed application to TMP-Marian. Assistance is based on Federal Income Eligibility Guidelines.

**Priority Deadline June 15 – All Pre-Enrollment information must be on file before application will be processed.**

HOUSEHOLD MEMBERS				TOTAL HOUSEHOLD GROSS INCOME BEFORE ANY DEDUCTIONS				
	List Names of ALL Household Members		School Name (or "NA" if child is not in school)	Grade	Frequency: Circle ONE next to each income amount: W=Weekly, E2=Every 2 Weeks, 2M=Twice a Month, M=Monthly, Y=Yearly			
	First Name	Last Name			Earnings from Work		Other Regular Income	
					Amount	Select Frequency	Amount	Select Frequency
1.					W E2 2M M Y		W E2 2M M Y	
2.					W E2 2M M Y		W E2 2M M Y	
3.					W E2 2M M Y		W E2 2M M Y	
4.					W E2 2M M Y		W E2 2M M Y	
5.					W E2 2M M Y		W E2 2M M Y	
6.					W E2 2M M Y		W E2 2M M Y	
7.					W E2 2M M Y		W E2 2M M Y	
8.					W E2 2M M Y		W E2 2M M Y	

**IMPORTANT – MUST ATTACH FRONT PAGE OF MOST RECENT TAX RETURN.**

Comments:

SIGNATURE - An adult household member must sign the application box.

Print Name: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

Address, City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

I certify (promise) that all information on this application is true and that all income is reported.

Sign Here X \_\_\_\_\_ Date: \_\_\_\_\_

**FOR SCHOOL USE ONLY. DO NOT WRITE BELOW.**

Application Type (check one)

Total Household Income : \$ \_\_\_\_\_ Household Size: \_\_\_\_\_

Household's Income Frequency – Circle ONE: W E2 2M M Y Multiple=Yearly

Application Status

Approved..... Amount: \_\_\_\_\_

Denied .....  Income over allowed amount  Incomplete/missing:

Notes: \_\_\_\_\_

Determining Official's Signature:

Approval/Denial Date:

Notification Date: