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### 2021-2022 Tuition Assistance Application

**Do not leave any section of this application blank - if an area does not apply, write n/a.**

**Adult 1** PARENT, GUARDIAN, or OTHER ADULT RESPONSIBLE FOR TUITION

First and Last Name \_\_\_\_\_ Relationship to student(s) \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Which local parish do you support? \_\_\_\_\_ Best way to contact with questions \_\_\_\_\_

If you are employed by a local Catholic school, please list the school name here: \_\_\_\_\_

**Adult 2** PARENT, GUARDIAN, or OTHER ADULT RESIDING WITH ADULT 1

First and Last Name \_\_\_\_\_ Relationship to Adult 1 \_\_\_\_\_

Relationship to student(s) \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Email \_\_\_\_\_

If you are employed by a local Catholic school, please list the school name here: \_\_\_\_\_

**Dependents** LIST ALL DEPENDENTS IN ORDER OF OLDEST TO YOUNGEST.

| Dependent Last Name | Dependent First Name | 2021-2022 Grade | Relationship to Adult 1 |
|---------------------|----------------------|-----------------|-------------------------|
|                     |                      |                 |                         |
|                     |                      |                 |                         |
|                     |                      |                 |                         |
|                     |                      |                 |                         |
|                     |                      |                 |                         |
|                     |                      |                 |                         |

**Household Information**

Below list anyone not listed above who is living in your home and provide their relationship to Adult 1:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Do you receive and/or pay child support?  
 Receive \$ \_\_\_\_\_ (monthly)  
 Pay \$ \_\_\_\_\_ (monthly)  
 Neither

Current housing arrangements of Adult 1 (check all that apply):  
 Married     Single (never married)     Divorced  
 Separated     Widowed     Remarried  
 Residing with Significant Other     Residing with Parents  
 Other \_\_\_\_\_

Applicant is responsible for \_\_\_\_\_% of K-8 Catholic school students' tuition. If not 100%, who is responsible for remainder? \_\_\_\_\_ If minor child(ren) are not claimed on the accompanying tax return, who claimed them? \_\_\_\_\_

**Housing Information**

If renting, what is monthly rent? \$ \_\_\_\_\_ If own, what is monthly mortgage? \$ \_\_\_\_\_

Portion paid by Adults 1 & 2: \$ \_\_\_\_\_ Portion paid by Adults 1 & 2: \$ \_\_\_\_\_

If a portion is paid by other sources, including family, renters, or government housing assistance, please list those sources here: \_\_\_\_\_

Do not leave any section of this application blank - if an area does not apply, write n/a.

**NON-TAXABLE INCOME**

PLEASE LIST TOTAL MONTHLY NON-TAXABLE INCOME FOR ALL RECIPIENTS. IF NONE RECEIVED WRITE \$0 OR N/A.

| ALIMONY      | CHILD SUPPORT                          | FOOD ASSISTANCE | SOCIAL SECURITY INCOME          | DEPENDENT SOCIAL SECURITY |
|--------------|--|-----------------|---------------------------------|---------------------------|
| \$           | \$                                     | \$              | \$                              | \$                        |
| UNEMPLOYMENT | LOANS/GIFTS FROM FAMILY AND/OR FRIENDS |                 | FIP (Family Investment Program) | OTHER: _____              |
| \$           | \$                                     | \$              | \$                              | \$                        |

**EXPLANATIONS (IF NEEDED)**

If your 2020 State 1040 Tax Return does not accurately represent your current income or family situation, please explain below **IN DETAIL** that will allow us to properly adjust your income/application information (if necessary). Please provide documentation of noted changes when available/requested. A separate sheet may be attached.

- Change of work status\*     Recent Separation/Divorce     Extreme medical expenses     Change in number of dependents

\* If there has been a change in income/employer in the last 12 months, copies of that wage earner's last 3 pay stubs or documentation of unemployment/other jobless benefits are necessary to process your application.

Did you apply for financial assistance with Embracing Our Future-Family Tuition Plan?

- Yes, applied.  
 Received assistance.  
 Have not received assistance.

**APPLICATION CHECKLIST - Application will be returned if checklist is not complete.**

- I have included **2020 State 1040 TAX RETURNS** for **ALL** income earning household members not listed as dependents on reverse.
- I did not file 2020 taxes in State, but have included my 2020 Federal 1040 Tax Return.
  - I was not required to file taxes but have included documentation for non-taxable income listed above.
  - I have filed for an extension and have included a copy of my 2020 Extension for Filing Request and W2 forms for all income earning household members not listed as dependents on reverse.
- I have included my **SCHEDULE C, E, AND/OR F TAX FORMS** if they were a part of my 2020 Federal Tax Return.
- I have verified that all areas of this application are complete, and have written N/A in sections that do not apply to my family.
- I understand that incomplete applications will be returned, and as a result my application will be delayed.

I verify that all information on this application is true and correct. INITIAL \_\_\_\_\_

I verify that the tax returns accompanying this application is a true copy of my filed return. INITIAL \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Complete applications and required income documentation should be sent to Our Lady of Lourdes, Attn: Tuition Assistance Committee, 1414 Mississippi Blvd., Bettendorf, IA 52722. Allow 6 weeks for processing.

Letters will be sent to applicants once application process is complete.