

FOR OFFICE USE ONLY

Date Received: _____

School Official Initial: _____

FAMILY TUITION ASSISTANCE PROGRAM
2024-25 SCHOOL YEAR

Welcome to the Guardian Angels Central Catholic family. In our attempt to fulfill our mission of preparing all students to reach their fullest potential by learning and leading through Christ we are pleased to offer you the opportunity for quality Catholic education.

The Family Tuition Assistance Program has been established to help provide financial resources to those families who desire a Catholic education but may require tuition assistance.

The completion of this form is only required if a family wishes to apply for tuition assistance through Guardian Angels Central Catholic.

We ask that any family applying for our local Family Tuition Assistance would also apply to the Children’s Scholarship Fund (grades K-8) and/or the Catholic Futures Foundation (grades 9-12).

Information for these opportunities may be acquired through the school or parish.

Please complete the following application form and return the completed application to the school office by **MAY 17, 2024**. If you have any questions or concerns regarding the application process please call (402) 372-5328. Thank you!

FAMILY TUITION ASSISTANCE APPLICATION FOR 2024-25 SCHOOL YEAR

Family name _____ **Parish affiliation** _____

Father’s Name: _____ **Address:** _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Mother’s Name: _____ **Address:** _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

PARENT STATUS: Both live at home ___ Deceased (Father ___ Mother ___) Divorced ___ Separated ___

Student lives with: _____ Person responsible for students’ tuition? _____

STUDENTS TO BE ENROLLED AT GUARDIAN ANGELS CENTRAL CATHOLIC:

NAME	AGE	GRADE for 2024-25
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(MOTHER) _____

We request financial assistance in the amount of \$ _____.