Nativity of Our Lord School Financial Aid application

Due Date: May 1, 2016

Nativity of Our Lord School Scholarship Program



PARENT NAME		
HOME ADDRESS		
CITY/STATE/ZIP		
Home Phone	Work	Cell
Registered Parish		

Application Information: (please type or print legibly)

A. Family Information: List <u>all</u> children in family (youngest to oldest)

Student's Full Name	School in Sept. 20	Grade in Sept. 20
B. Parent Information		
Full Name		Occupation
FatherStepfather	Guardian Other	
Full Name		Occupation
MotherStepmothe	rGuardianOther	
Parents' Marital Status : Married in same reside	ence (Report income for both	resident parents)
Single or Widowed (Rep	port income for one parent)	
Separated or Divorced	(Report income for parent wl	ho provides major source of support)
** Note: If either pa	arent is remarried, Stepparen	nt income must also be reported **
C. List any other adult (attach separate sheet if ne	-	usehold and are supported by you.
Full Name	Age	Relationship

THIS SECTION MUST BE COMPLETED

You <u>must submit</u> a signed copy of your completed 2016 tax return with all sections completed. If you are not required to file a federal tax return, complete section E, on one of the appropriate IRS forms and supply supporting documents.

D. Total Income from Tax Return: Form 1040 (Line 23 1040EZ (Line 3)	s) or 1040A (Line 14) or
\$	
Other Untaxed Income and Benefits:	Yearly Totals
Social Security	
Aid to Families with dependent children	
Child Support received for all children	
D.P.A. Welfare Benefits	
Workers' Comp and/or Disability Benefits	
Others (specify)	
Total Other Income from Tax Return	\$

E. If you will not file an Income Tax Return 1040, 1040A or 1040EZ, then you must list the sources of income and amounts used for living expenses (Documentation required and attached to this application)

	Yearly Totals
Father's Earned Income	-
Mother's Earned Income	
Interest/Dividend Income	-
Business Income	-
Social Security	
Aid to families with dependent children	
Child support received for all children	
D.P.A. Welfare Benefits	
Unemployment Compensation	-
Worker's Compensation and/or Disability Benefits	
Others (Specify)	
AL INCOME RECEIVED for parents wire turn	
	\$
rent Testimony se summarize your family situation:	

Please list any parish or comr	nunity service involvement (individually or as a family unit)
	nation on this application and the documentation submitted with it is
true. The scholarship fou documentation to verify f	ndation reserves the right to request additional information and inancial status.
accumentation to vermy i	manda statas.
 Date	Signature Required of Parent or Guardian
Date	Signature Required of Farent of Gaardian
Date	Signature Required of Parent or Guardian
G. Student Information:	
	ol, what community service do you perform in your community or in your parish?
Jse additional pages if neede	
Date	Student Signature