

**St. Frances Cabrini Education Fund
1025 South 7th Avenue
West Bend, Wisconsin 53095-4652**

EDUCATION GRANT APPLICATION

St. Frances Cabrini Parish Day School
St. Frances Cabrini Religious Education

Dear Grant Applicant,

The administration of St. Frances Cabrini Education Fund Education Grants, (formerly financial aid) is the responsibility of the St. Frances Cabrini Education Fund Grant Review Committee. This committee consists of the Pastor, Director of Administrative Services, Parish Trustee Secretary and either the Director of Christian Formation or School Principal. The committee will operate under strict confidentiality in order to ensure the privacy of any information you are being asked to supply. (See Guidelines #5)

Please note that we require not only financial information but also a space to indicate your stewardship of time and a short narrative of need. While the financial parts of the form are important, the donated time to the parish ministries by you and your students are just as important to us. The manner in which you offer your time and talent to our parish-wide ministries are highly valued as a means by which you may support the faith community in a non-financial way.

Please note these important due dates regarding the submission of applications for St. Frances Cabrini Education Fund Educational Grants:

May 15, 2011 for the 2011-2012 Academic Year

July 15, 2011 for late registrants for 2011-2012 Academic Year

October 15, 2011 for those whose life changes require grant application

January 15, 2012 for those whose life changes require grant application

(Significant loss of income, death, divorce, etc.)

Our purpose is to ensure a fair and equitable distribution of grant funds to families via a process that maintains the privacy of applicants and awards the grants based on basic standards of need, asset and income levels and parish community involvement.

Should you have any questions regarding the Education Grant process or need help in completing the form please do not hesitate to call me at 262-338-2366 or email me at john@stfcabrini.com.

Sincerely,

John F. Rozek
Director of Administrative Services

GUIDELINES FOR COMPLETING ST. FRANCES CABRINI EDUCATION FUND GRANT APPLICATION

The following guidelines will help you as you fill out the grant application form. The form along with any required information must be returned prior to May 15, July 15, October 15 or January 15 to:

St. Frances Cabrini Education Fund Grant Awards
Attn: John Rozek
1025 South 7th Avenue
West Bend, Wisconsin 53095-4652

1. Grants are available for K5 through 8th grade tuition only based on parish membership and participation and financial status.
2. All questions must be answered or the grant form will be returned to you. This may result in a delay in determination of grant award.
3. The information on the grant application form may be verified by the Director of Administrative Services at any time during the academic year. Additional information may be required as needed.
4. Decisions made by the Education Grant Committee are final.
5. Any and all information that you provide will be treated confidentially. Any information submitted will be returned to the applicant. No files will be maintained of your information.
6. If you have any questions, or need help in completing the grant application form please contact John Rozek, Director of Administrative Services at 262-338-2366 x13 or email: john@stfcabrini.com
7. You will be notified of the final status of your grant application approximately one month after the appropriate submission deadline.
8. Income, as indicated on the grant application form, includes **any and all sources of money earned by your family.** These sources include, but are not limited to:

*Wages, salary, fees and commissions	*Self employment income/Royalties
*Social Security payments	*Unreported cash income
*Dividends and interest of any kind	*Welfare/Assistance
*Unemployment compensation	*Retirement or Pension
*Alimony/Child Support	*Financial contributions from others

**ST. FRANCES CABRINI EDUCATION FUND
GRANT APPLICATION
(Due May 15)**

Family Name _____

Address _____ City&Zip _____

Phone (Day) _____ Phone (Eve) _____

Number of persons living in household _____

List all persons living in household:

<u>Name (Last, First)</u>	<u>Relationship</u>	<u>Age</u>	Current Grade
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1. _____

2. _____

3. _____

4. _____

5. _____

How many years have you been a registered parish member? _____

Our family has served the general parish by giving of our time in the following areas: (Please list the various ministry areas of the parish in which you and each family member participate.)

I/We are applying for an education grant because: (Please write your reasons for applying for an education grant in the space below. It is important that you include any and all pertinent information as to why your present situation necessitates the need to request an education grant.)

(Please feel free to use additional sheets for more information)

TOTAL AMOUNT OF GRANT REQUESTED \$ _____

CONFIDENTIAL FINANCIAL INFORMATION

Please provide the total dollar amount for:

Assets:

- Cash On Hand _____
- Cash Checking _____
- Cash Savings _____
- Saving Bonds _____
- Pension Funds _____
- Retirement Funds _____
- Stocks/Mutual Funds _____
- Cash Value Life Insurance _____
- Home Value _____
- Second Home _____
- Vehicles _____
- Rental Property _____
- Other _____

Liabilities:

- Mortgage _____
- Auto Loan/s _____
- Other Loans _____
- Credit Card Debt _____
- Other Debts _____
- Liens _____

TOTAL ASSETS _____

TOTAL LIABILITIES _____

**CONFIDENTIAL FINANCIAL INFORMATION
YEARLY INCOME AND EXPENSE**

Income:	Expenses:
My income _____	Mortgage Payments _____
Spouse's Income _____	Rent Payments _____
Other Income (All sources describe) _____ _____ _____	Property Taxes _____
	Insurance Costs _____
	Loan Payments:
	Auto _____
	Home Equity _____
	Credit Card Payments _____
	Vehicle Expenses _____
	Other Expenses _____
	_____ _____
Total Yearly Income _____	Total Yearly Expenses _____

Please attach a copy of page 1 and page 2 of your last year's Federal tax forms as verification of data provided (tax forms and application will be returned to you)

I/We verify that the all information on the St. Frances Cabrini Education Grant Application Form is true and correct to the best of my/our knowledge. I/We understand that should upon verification information that I/We have submitted be false it could lead to a denial or revocation of the awarded grant.

Signature _____ Date _____

Signature _____ Date _____