

# St. Mary Catholic Education Foundation Greeley

## 2017-2018 Scholarship Criteria

### Financial Eligibility

Applicant must include every member of the household who earns income, regardless of marital status.

| <u>Household Size</u> |       | <u>Annual Income</u> |
|-----------------------|-------|----------------------|
| 2                     | up to | \$36,000             |
| 3                     |       | \$47,000             |
| 4                     |       | \$58,000             |
| 5                     |       | \$68,000             |
| 6                     |       | \$78,000             |
| 7                     |       | \$88,000             |
| 8                     |       | \$98,000             |

*For each additional person in the household, add \$10,000*

### Awarding of Scholarship:

Scholarships are awarded by semester. In order to be eligible for the 2<sup>nd</sup> semester scholarship, tuition must be current and fundraising and volunteerism efforts need to be evident. All families on scholarship need to pay annually or monthly via SMART tuition.

**Tuition will never be 100% funded through scholarships.**

**APPLICATION DEADLINE: April 28, 2017**

# St. Mary Catholic Education Foundation Greeley

## 2017-2018 Academic School Year

*Please print clearly*

Registered Member of \_\_\_\_\_ (Church or Parish)

Date: \_\_\_\_\_

Name of Parents/Guardians: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell#: \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_

Please list the number of people living in your household: \_\_\_\_\_

### STUDENT INFORMATION

List student(s) for whom assistance is being requested.  
(Scholarship assistance is not available for preschool students.)

| <u>Full Name of Student</u> | <u>Male/Female</u> | <u>Grades K – 8<sup>th</sup></u> |
|-----------------------------|--------------------|----------------------------------|
| _____                       | _____              | _____                            |
| _____                       | _____              | _____                            |
| _____                       | _____              | _____                            |
| _____                       | _____              | _____                            |
| _____                       | _____              | _____                            |

**INCOME INFORMATION**

A. Wages, (you MUST include a copy of last year's tax return – first 2 pages of the Federal Federal 1040 or 1040EZ form.) **All adults living in home regardless of marital status must submit tax returns.**

Father/Guardian Annual Income \$ \_\_\_\_\_

Mother/Guardian Annual Income \$ \_\_\_\_\_

Other Adult (in Household) Annual Income \$ \_\_\_\_\_

B. Social Security (attach last year's SS statement) \$ \_\_\_\_\_

C. Public Financial Assistance \$ \_\_\_\_\_  
(attach proof of last year's payments received)

D. Other Income (child support etc.) \$ \_\_\_\_\_  
(attach proof of last year's payments received)

**TOTAL INCOME** \$ \_\_\_\_\_

**PLEASE NOTE:** To be considered, you MUST provide all information, including tax forms documenting your previous year's income. If your taxes are not complete, the application is still due April 28, 2017, and include a copy of your W-2 and/or 1099, and/or K-1 tax form.

I hereby certify all the information provided on this application is true to the best of my knowledge.

\_\_\_\_\_  
Father/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother/Guardian Signature

\_\_\_\_\_  
Date

**Please submit your application to the  
business office by April 28, 2017.**

