

Financial Aid Application

This form and supporting documentation must be received by April 15. Information is confidential. The Parish School Financial Aid Committee is comprised of the pastoral team and two parish Finance Board members who have no connection with the School. Please complete the entire form.

NAME: _____
ADDRESS: _____
TELEPHONE: _____
PARISH: _____

NAME(S) OF MY CHILD(REN) ENROLLED AT ST. MICHAEL SCHOOL:

Child #1: _____ Grade: _____
Child #2: _____ Grade: _____
Child #3: _____ Grade: _____

NAMES OF OTHER DEPENDENTS AT HOME: 3

Dependent #1 _____ Age: _____
Dependent #2 _____ Age: _____
Dependent #3 _____ Age: _____

MARITAL STATUS: _____

COMBINED GROSS INCOME: \$ _____

* This amount must be substantiated by a copy of last year's income tax return 1040 or 1040A plus copies of W-2 forms. **PLEASE ATTACH TO THIS FORM.**

AMOUNT OF FINANCIAL AID REQUESTED: \$ _____

Have you ever received Financial Aid from St. Michael's before? If yes, when: _____

NOTE: Additional information may be required to process this application.

Each undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be true and correct until a written notice of change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness. You are authorized to answer questions about your credit experience with me/us.

Signature (individual) _____
Social Security # _____ - _____ - _____ Date of Birth: _____

Signature (individual) _____
Social Security # _____ - _____ - _____ Date of Birth: _____

STATEMENT OF NEED

Please indicate below in narrative form the reason for application for financial aid. Include special circumstances (e.g. work disposition, medical needs) that may qualify you for aid. **The allocation of financial aid monies will be based on severity of need.**

Kindly return this completed form and supporting documentation to:
The Parish School Financial Aid Committee
c/o Pastoral Team
196 Main Street
North Andover, MA 01845