



Columbus Catholic Schools Financial Assistance Application (2024-2025)

Parent/Guardian Names: _____

Indicate relationship by circling one: Parent or Guardian

Address: _____

City/State/Zip Code: _____

Eligible Student(s)

Name: _____ School: _____ Grade in 2024-25 _____

Name: _____ School: _____ Grade in 2024-25 _____

Name: _____ School: _____ Grade in 2024-25 _____

Name: _____ School: _____ Grade in 2024-25 _____

Name: _____ School: _____ Grade in 2024-25 _____

Name: _____ School: _____ Grade in 2024-25 _____

Student(s) live with: _____

Parental Status: Both live at home ___ Deceased ___ Divorced ___ Separated ___

Families receiving tuition assistance are expected to take an active role in volunteer activities for Columbus Catholic Schools. Please say “yes” when called upon.



2023 INCOME VERIFICATION
PLEASE ATTACH 2023 TAX RETURN

Number in household: Adults: _____ Children: _____ (under the age of 19)
 (Total must match exemptions indicated on 2023 IRS Tax Form. If not, please explain.)

TAXABLE INCOME:

Adjusted Gross Income (from 2023 filed IRS tax form) \$ _____

Wages, W-2 (income tax was not filed) \$ _____

NON-TAXABLE INCOME:

Tax-Exempt Interest \$ _____

Social Security Benefits (include dependent benefits) \$ _____

Child Support Received \$ _____

Temporary Assistance for Needy Families (TANF) \$ _____

Welfare/Public Assistance \$ _____

SNAP (Food Stamps) \$ _____

Tuition Support from Family/Friends \$ _____

Worker's Compensation \$ _____

Other Non-Taxable Income \$ _____

TOTAL FAMILY INCOME \$ _____

Grades K-8 please initial if you have applied for the Children's Scholarship Fund: _____

Please use the lines below for any additional information you wish for us to know about.

I certify that all the information provided on this form is true and complete to the best of my knowledge. I authorize Columbus Catholic Schools to utilize the information set forth and release Columbus Catholic Schools from any liability from its efforts to obtain assistance funding.

PARENT/GUARDIAN'S SIGNATURE: _____ DATE: _____