



Parochial/Independent High School Application 2012-2013

Please read the *Application Procedures* page on our website before filling out this application.
Use a black or blue pen and print clearly.

Student Information

Student Name: _____ Year of H.S. Graduation: _____

Address: _____ Apt./Unit/Floor: _____

City/State: _____ Zip Code: _____

Home Phone #: (____) _____ Cell Phone #: (____) _____

Race (optional): _____ Email: _____

DOB: ____/____/____

High School during 2012-2013 school year: _____

Student School I.D. _____

Last four digits of Social Security #: _____

- I live with: Mother only Father only Both parents, but at least one is disabled
- Guardians/relatives/friends/foster * Other, please explain _____

*If you are in foster care, please **provide written documentation** of your foster status from your Social Worker/Case Manager.

Social Worker's/Case Manager's Signature

(____) _____
Phone Number

Social Worker's/Case Manager's Printed Name

Household Information: List *every* person who is living in the applicant's home.

Members of Household	Relationship to Student	Current Occupation or Grade	Age
1. (student's name)	Self		
2.			
3.			
4.			
5.			
6.			
7.			
8.			
List of other contributors to household:			
1.			

Parent/Guardian Information

Please complete the following information regarding parent(s)/guardian(s) in your household:

Martial Status (check one):

- Single (never married)
- Divorced (please provide documentation)
- Widowed
- Separated (please provide documentation)
- Married and living together (provide current Social Security Disability statement for *at least 1* parent)

Parent's/Guardian's Name: _____ Cell Phone #: (____) _____

Parent's/Guardian's Name: _____ Cell Phone #: (____) _____

Financial Information

Part 1. (check one)

My parent(s) has/have filed 2011 1040, 1040A, or 1040EZ tax forms with the IRS.

OR

My parent(s) does/do not file a federal income tax return.

Part 2.

Make sure to attach **your most recent** statements documenting each source of income, benefits, or assets. Provide **all** sources of income, including those that may not appear on your tax return. A family's **total income and assets** will be considered when determining an applicant's eligibility.

You must include **all** sources of income and amounts in **all** of the boxes below. If you do not receive a certain type of income, write "0" in the box.

Income, Benefits and Assets	Gross Yearly Totals
Mother's/Guardian's Wages • Provide tax return or three most recent paystubs	\$
Father's/Guardian's Wages • Provide tax return or three most recent paystubs	\$
Social Security/Disability • Provide SSA Statement of Benefits	\$
Worker's Compensation • Provide documentation	\$
Welfare Benefits (Food Stamps & Cash) • Provide most recent Department of Public Assistance (DPA) Statement	\$
Child Support received for <u>all</u> children • Provide court decision, notarized agreement, or PACSES printout	\$
Interest/Dividend Income • Provide 1099-INT tax form	\$
Business Income • Provide Schedule C/C-EZ or Schedule E (rental property) tax form	\$
Unemployment Compensation • Provide Notice of Financial Determination/Current Claim Summary	\$
Cash; Savings and/or Checking Account Balances (over \$500)	\$
Current Market Value of Investments (Stocks, Bonds, Real Estate, etc.)	\$
Current Market Value of Real Estate Other Than Primary Home	\$
Income From Insurance and/or Pension Payments • Provide documentation	\$
Other Income (e.g., foster child payments)	\$

Application Checklist:

- I have included a copy of my most recent report card. It is an official copy showing my parent's/guardian's name and current address.
- I have attached a signed copy of all pages of the IRS Form 1040, 1040A or 1040EZ tax return(s) for my parent(s)/guardian(s).
- I have included proof of family income, as requested on the income grid.
- I have included my personal statement.
- My parent/guardian and I have signed the application.
- An official from my school has signed the application.

School Type:

- Archdiocese of Philadelphia
- Independent school, accredited by Middle States Association, PAIS, or ACSI.

We certify that all the information and supporting documentation is true and complete to the best of our knowledge. We understand that if we have knowingly withheld or falsified information, the grant may be revoked. We understand that if the required documentation is missing, this application will not be processed even if it was received before the deadline.

We give our permission for the school(s) or program(s) named in this application to release and/or discuss grade reports, financial information, and post-secondary plans with the Ellis Trust and its administration. All information will be kept confidential.

Date: _____

Signature of Parent/Guardian **(Required)**

Signature of Student **(Required)**

Signature of School or Program Official **(Required)**

(____)_____
Phone Number

School or Program Official's Printed Title and Name

For office use only (please do not write in this section)

Date received: _____

NEW or RENEWAL