

**DIVINE SAVIOR
Tuition Grant Application**

Fill out form completely and legibly. Include copies of W-2's and applicable tax forms and return by _____.

PRIMARY FINANCIALLY RESPONSIBLE PARTY

Applicant Last Name	Address	City, State, Zip
Marital status (circle): Single / Married / Divorced / Separated		Home phone: _____
Father First Name _____	Mother First Name _____	
Employer: _____	Employer: _____	
Work phone: _____	Work phone: _____	
Cell phone: _____	Cell phone: _____	
Religion: _____	Religion: _____	
Parish/City: _____	Parish/City: _____	

SECOND FINANCIALLY RESPONSIBLE PARTY (if applicable)

Last Name	Address	City, State, Zip
Marital Statue (circle): Single / Married / Divorced / Separated		Home phone: _____
Father First Name: _____	Mother First Name: _____	
Employer: _____	Employer: _____	
Work phone: _____	Work phone: _____	
Cell phone: _____	Cell phone: _____	
Religion: _____	Religion: _____	
Parish/City: _____	Parish/City: _____	

ALL CHILDREN IN FAMILY/HOUSEHOLD

Last Name	First Name	Age	2010 - 11 Grade	School
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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1. Please explain your family needs for a tuition grant. Include the effects of extensive medial bills, loss of jobs, disability, family/custody issues, etc.

2. Please share information regarding your child/children.
(Academic performance, participation in co-curricular activities, special needs, etc.)

3. If you have a Divine Savior student, what is his/her relationship to Divine Savior (HRS, SPPS, ST. ANNA) alumni (i.e. parents, grandparents, graduates)?

4. List your annual household salary.

\$ _____ \$ _____
Annual gross salary – household Additional income (if applicable)

Signature: _____ Phone# _____ Date: _____

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- **MUST include copies of your latest W – 2’s.**
 - **Copies of your latest Federal Income Tax Return may be required to verify income.**
 - Application will only be considered with submitted copies of W - 2 form.
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Deadline _____

Please submit this application to:
Divine Savior Business Office
1814 Madison Street
New Holstein, WI 53061

