

St. Gregory the Great Family Faith Formation Board
Tuition Waiver Request Form for Traditional Program Only
(Disciples' Camp, Generations of Faith, Splash & Wednesday Gr. 1-4 Alt. Program excluded)

Office Use Only
Approved _____
Denied _____
Board Signature _____

School Year: _____

(Confidential statement to be completed by parent or guardian)

(Please print)

Last Name: _____
(Parent or Guardian)

Mother: _____ Father: _____

Address: _____

Zip Code: _____ Home Phone: _____

Place of Employment:

Father: _____ Work Phone: _____

Mother: _____ Work Phone: _____

If above is not completed for father/mother, it is because he/she is:

- | | |
|---|--|
| 1. _____ Deceased (date: _____) | 5. _____ Separated/divorced and not living with family |
| 2. _____ Disabled or sick and not working | 6. _____ Student and not working |
| 3. _____ Full time homemaker | 7. _____ Unemployed and not earning money |
| 4. _____ Retired and not working | 8. _____ Other: _____ |

Give information below for all dependent children (if additional space is needed, please use separate sheet of paper)

	<u>Name</u>	<u>Age</u>	<u>Living with you? (Y/N)</u>	<u>School</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

Are you involved in any parish volunteer service? _____ Please specify: _____

If not, are you willing to volunteer? _____

Reason for requesting tuition waiver: _____

Request for (please check): Partial waiver _____ Full waiver _____

**THESE SIGNATURES ATTEST THAT WE BELIEVE THE INFORMATION ON THIS FORM
TO BE COMPLETE AND ACCURATE.**
(If married, **BOTH** signatures are required)

Signature of mother/guardian: _____ Date: _____

Signature of father/guardian: _____ Date: _____