

MHT School CARES Grant Application

(Caring About Religious Education in Schools)

Last Name: _____

Mother: _____ Occupation: _____

Father: _____ Occupation: _____

Check one: Contributing Member of MHT Parish Member of _____ Parish

Please list all children in grades K through 12th grade living with you.

<i>Name</i>	<i>Age</i>	<i>Grade</i>	<i>School Attending in 2010/11</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list all other children in your household (pre-kindergarten, post high school) and check the appropriate box.

<i>Name</i>	<i>Age</i>		
_____	_____	<input type="checkbox"/> attends college	<input type="checkbox"/> pre-kindergarten
_____	_____	<input type="checkbox"/> attends college	<input type="checkbox"/> pre-kindergarten
_____	_____	<input type="checkbox"/> attends college	<input type="checkbox"/> pre-kindergarten
_____	_____	<input type="checkbox"/> attends college	<input type="checkbox"/> pre-kindergarten

Financial Information

Please mark the box that best describes your household's total income. This would include income listed on your 1040 tax forms and other non-taxable income. Non-taxable income might include babysitting, child support, alimony, or other money you get from services you provide.

- | | | |
|--|--|--|
| <input type="checkbox"/> Under \$25,000 | <input type="checkbox"/> \$45,000 - \$54,999 | <input type="checkbox"/> \$75,000 - \$84,999 |
| <input type="checkbox"/> \$25,000 - \$34,999 | <input type="checkbox"/> \$55,000 - \$64,999 | <input type="checkbox"/> \$85,000 - \$95,000 |
| <input type="checkbox"/> \$35,000 - \$44,999 | <input type="checkbox"/> \$65,000 - \$74,999 | <input type="checkbox"/> Above \$95,000 |

Please indicate below any special circumstances or situations that pertain to your household. (For example: job lay-off, serious illness, elderly care, etc.)

Signature Verification

I, _____, certify that the information provided on this form is true and accurate to the best of my knowledge.

Privacy Promise

The information on this form will be held in complete confidence. Names will be omitted for committee review. The information on this form is for the strict purpose of distributing financial aid scholarships for students attending Most Holy Trinity School. Families selected to receive funds will be notified by mail and may refuse the scholarship offer. Any awards refused will be reassigned to other families.