Parent Name:
$\square$

## Address



## Email:



Are you employed?


## City, State \& Zip Code



## Phone:

$\square$
Household Gross Income:
$\square$

Are both parents at the above address? $\square$ If not, please provide the following information: Parent Name:
$\square$

## Address

$\square$

## Email:

$\square$

City, State \& Zip Code
$\square$
Phone:
$\square$
Household Gross Income:
$\square$

Is student's tuition paid through multiple accounts? $\square$
Child's Name \& Grade:
$\square$


For office use only:

KCHS TUITION ASSISTANCE FORM

Which Tuition Assistance are you applying for?
Tuition Assistance open to all students:(\$250) The Carranza Family Assistance(\$500)Attitude, Attitude, Attitude Assistance(\$500) The Scott Miner Memorial Assistance(\$500) The Jerry Liveringhouse Assistance(\$500) The Blue Cross Blue Shield Assistance(\$500) The Julie Sorensen Family Assistance(\$1000) The Poland Family Assistance(\$1000) The Buettner Family Assistance(\$1500) The Chick \& Judy Messbarger Family Assistance
Tuition Assistance with special requirements:
Name:(\$250) Knights of Columbus-Musts have family member currently in KOC, only. $\square$(\$400)The Connell Family-Senior Only(\$500) The Bruce Blankenship Assistance-incoming 9th grader, only.(\$500) The Younes Family Assistance-incoming 6th grader, only.(\$500) The Class of 2005 Assistance-incoming 9th grader, only.(\$1000) The Prellwitz Family Assistance-to incoming 6th grader, only.(\$1500) The Good Samaritan Hospital Assistance-student must be willing to shadow in a medical facility.

Kearney Catholic High School Mission Statement: Preparing students academically and spiritually for a life of service to the Church and community. How do you feel our mission statement will provide you skills for your future, that you can not get anywhere else, in Kearney? Please explain in 5-6 sentences.

Please print \& email both pages to: kchsfoundation@kearneycatholic.org or drop off at KCHS Foundation office: 20 E 21st Street

