



2018/2019 Parish Need-Based Scholarship Application

Parents/Guardians: _____

Date: _____

Father's Full Name: _____

Mother's Full Name: _____

Address _____

Parish Envelope # _____ Contact Phone(s) _____

List the full names and grades of your children that will be attending St. Francis Xavier School:

Child (s) Full Name:

Grade in upcoming school year 2017-2018:

_____	_____
_____	_____
_____	_____

Does your family give any service to the Parish and/or are you involved in any Parish Ministry? _____

PLEASE NOTE – CATHOLIC EDUCATION ARIZONA (CEAZ) NEED-BASED ASSISTANCE MUST BE APPLIED FOR TO BE ELIGIBLE TO BE CONSIDERED FOR A PARISH SCHOLARSHIP.

Please check all Scholarships your family has applied to for assistance for the coming school year:

- | | |
|--|-----------------------|
| ___ 1. Brophy | Amount received _____ |
| ___ 2. Catholic Education Arizona (Formerly CTODP) | Amount received _____ |
| ___ 3. Arizona Private Education Scholarship Fund, Inc. | Amount received _____ |
| ___ 4. AZ Scholarship Fund | Amount received _____ |
| ___ 5. AZ School Choice Trust | Amount received _____ |
| ___ 6. Arizona Youth Education Scholarships | Amount received _____ |
| ___ 7. HIGHER Education School Tuition Organization, Inc. | Amount received _____ |
| ___ 8. Institute for Better Education | Amount received _____ |
| ___ 9. Just Friends of Education, Inc. | Amount received _____ |
| ___ 10. Pappas Kids Schoolhouse Foundation | Amount received _____ |
| ___ 11. Scholarships For Educational Excellence Foundation | Amount received _____ |
| ___ 12. School Choice Arizona, Inc. | Amount received _____ |
| ___ 13. Tuition Organization for Private Schools (TOPS for Kids) | Amount received _____ |
| ___ 14. Other | Amount received _____ |

How much can you afford to pay once you have received scholarships from others? \$ _____

Amount of scholarship you are requesting from the Parish, please give a dollar amount: \$ _____

