

PARISH/CHURCH TUITION CREDIT

Please complete the Parish/Church Tuition Credit form and submit it to the pastor of your parish/church for approval if you meet the qualifying criteria.

A Parish/Church Tuition Credit is funding that may be provided by your parish/church to Incarnate Word Academy. The parish/church may award up to \$100 per student who qualifies. The amount awarded will be applied as a tuition credit when payment is received from the parish/church. The Parish/Church Tuition Credit is not applicable to Elementary Level - Traditional and Montessori students.

To qualify for Parish/Church Tuition Credit, the family must meet the following criteria:

- Be registered in the parish/church
- Be an active member of the parish/church
- Be a regular financial contributor to the parish/church

The parish/church reserves the right to review your contributions on a periodic basis and to verify the continued receipt of the parish subsidy.

APPLICATION FOR PARISH/CHURCH TUITION CREDIT

PART A: Family Information (To Be Completed By The Family Applying For A Parish/Church Tuition Credit)

Name of Parent(s)/Guardian(s): _____
Please Print

Address, City, Zip: _____
Please Print

Parish/Church where registered: _____
Please Print

Student(s) attending Incarnate Word Academy Middle Level or High School Level *(Please Print Names Clearly)*

Name: _____ Grade _____ 20____ – 20____
Please Print

Name: _____ Grade _____ 20____ – 20____
Please Print

Name: _____ Grade _____ 20____ – 20____
Please Print

Name: _____ Grade _____ 20____ – 20____
Please Print

By signing the Agreement our family acknowledges responsibility

1. To provide a good example to our children by attending Mass.
2. To participate in the life of the parish/congregation.
3. To contribute a just amount through regular use of the Parish Budget Envelope System.

Parent/Guardian signature: _____ Date: _____

FORWARD THIS COMPLETED FORM TO THE PARISH OFFICE FOR THE PASTOR'S APPROVAL.

PART B: Pastor's Approval

PARISH/CHURCH: _____

As Pastor, I verify that the _____ family:

Please Check One **Has met** the requirements to receive a tuition credit to Incarnate Word Academy in the amount of \$ _____ for the 20____ – 20____ school year.

Has not met the requirements to receive a tuition credit to Incarnate Word Academy for the 20____ – 20____ school year and is expected to pay the \$100 subsidy.

Pastor's Name: _____ Pastor's Signature: _____
Please Print

Parish address, city, zip code: _____
Please Print

Date: _____