

Dear Families,

Thank you for considering St. John Fisher Parish School.

Please see the attached Financial Eligibility Guidelines for the 2024-25 Tuition Assistance Program sponsored by Catholic Education Foundation of Los Angeles (CEF) to see if your family is eligible to apply for a tuition award.

St. John Fisher School is pleased to partner with CEF to offer this tuition assistance program to families applying to our school for the 2024-25 school year. If you are eligible for a tuition award, please submit the completed application and all required documentation to our school office.

May God bless you and your children.

Sincerely,

Mrs. Colleen M. Guenther

Mrs. Colleen M. Guenther

Principal



## **FY2025 FINANCIAL ELIGIBILITY GUIDELINES**

A student from a household with a total income at or below the following levels is eligible to apply for a Tuition Assistance Award from the Catholic Education Foundation (CEF).

Household Size	Δ	nnual Gross Income (Mission 1)	An	nual Gross Income (Mission 2)	Ann	ual Gross Income (Mission 3)
1	\$	21,797	\$	26,973	\$	30,544
2	\$	29,481	\$	36,482	\$	58,279
3	\$	37,166	\$	45,991	\$	67,788
4	\$	44,850	\$	55,500	\$	77,297
5	\$	52,534	\$	65,009	\$	86,806
6	\$	60,219	\$	74,518	\$	96,315
7	\$	67,903	\$	84,027	\$	105,824
8	\$	75,587	\$	93,536	\$	115,333

Note: For each additional individual after 8 persons,

add:

Mission 1: \$7,684 to \$75,587 Mission 2: \$8,837 to \$93,536 Mission 3: \$10,162 to \$115,333

CEF defines a **household** as all individuals living together in the same dwelling who share expenses for rent, utilities, food, clothing, and other necessities. A **one-member household** is a student who is his/her sole support, such as an institutionalized minor or adult. A foster child is only considered a one-member household if the welfare/placement agency maintains legal responsibility for the child.

<sup>\*</sup> Based on Federal Poverty Guidelines as of 10/18/21



CEF USE ONLY			
School Code			
School Name			
New Applicant	Yes No		
Renewal Applicant	Yes No		
Student ID #			

Cycle 3: 2024-2025

# Application for Tuition Assistance Program (TAP) Information submitted on this application will remain confidential.

		Student	t Information				
First Name: M		Middle Initial:			Last Name:		
Street Address:				Apartment/Un	 nit #:		
City:		State: California		ZIP Code:			
Date of Birth:			Sex:	 Male	Female		
				_	_		
Grade Level: Fall 2024	vel: Current School (Name):		School Type:		Catholic Private Charter Public Home School Other		
		<u>Voluntary Dem</u>	nographic Information				
Ethnicity: Afi	rican American	Armenian Caucasi	ian/White	Filipino			
☐ His	spanic/Latino	Pacific Islander Middle	Eastern	☐ Multiple Ethnicities			
☐ As	sian :	☐ Native American 1	Tribe:	_ [	Other:		
		For choices with blo	ank spaces, please specify.	1			
_	oman Catholic 🔲 Jewis	sh 🗌 Muslim 🔲 Mormo		Southern Baptist			
☐ Sik		☐ Hindu ☐ Buddhi	st		Other:		
∐ INC	Affiliation			For choices with blo	ank spaces, please specify.		
		Parent/Gua	rdian Informat	ion			
	Legal Parent/			Parent/Gu			
Name:				(Must reside with <i>Lego</i>	al Parent/Guardian A)		
First		Last	Name:			_	
<u>Relationship</u>	☐ Father	☐ Foster Parent	First		Last		
to Student:	☐ Mother	Step Parent	<u>Relationship</u>	Father	Foster Parent		
	Grandparent	☐ Guardian	to Student:	☐ Mother	Step Parent		
Marital Status:	☐ Single	Divorced		☐ Grandparent	☐ Guardian		
	Married	Domestic Partnership	<u>Relationship</u>	Spouse	Ex-Spouse		
	☐ Separated	Widowed	to Legal Parent/	<del></del>	☐ Domestic Partner	r	
<u>Employment</u>	☐ Employed; Occi	upation:	<u>Guardian A</u>	☐ Other			
Status:	, ,		<u>Employment</u>	Employed; Occ	cupation:		
	. ,		<u>Status</u> :	Employer:			
		Type of Business:		C C IC Employed	· = - (5		
	<u></u>				; Type of Business:		
	Unemployed	☐ Disabled ☐ Retired	t l		:		
1	Homemaker	Full-Time Student		Unemployed	☐ Disabled	Retired	
				☐ Homemaker	☐ Full-Time Studen	t	
F-mail·							
			E-mail:				
Mobile Phone:							

Sources of Income (2024-2025)				
Complete the in	formation below based on Income T			
	Legal Parent/Guardian A	Parent/Guardian B	CEF USE ONLY	
Filing Status	☐ Single ☐ Married; filed jointly ☐ Married; filed separately ☐ Head of Household ☐ Did not file	Single Married; filed jointly Married; filed separately Head of Household Did not file		
TAXABLE INCOME	Please provide sup	porting documents for each applicat	ble item.	
Employment Income (Form 1040, Line 1)	\$	\$		
Pension (Form 1040, Line 5a or Annual Pension Statement)	\$	\$		
SSI (Social Security) (Form 1040, Line 6a or SSI Statement)	\$	\$		
Capital Gains (Schedule D: Form 1040, Line 7)	\$	\$		
Schedule 1 (Form 1040, Line 8)	Please provide sup	porting documents for each applicat	ble item.	
Business/Self- Employment Income (Schedule C: Form Schedule 1, Line 3)	\$	\$		
Other Gains or (losses) (Form 4797: Form Schedule 1, Line 4)	\$	\$		
Rental, Partnerships, S Corp, Trust Income (Schedule E: Form Schedule 1, Line 5)	\$	\$		
Farm Income (Schedule F: Form Schedule 1, Line 6)	\$	\$		
Unemployment (Form Schedule 1, Line 7)	\$	\$		
Cash Income (Notarized Statement of Income)	\$	\$		
Annual Distribution from Investments (Trust funds, CDs, Stocks, IRAs, 401Ks, etc.)	\$	\$		
NON-TAXABLE INCOME	Please provide supporting documents for each applicable item.			
Military Compensation (Basic/Special Pay and/or Allowance)	Monthly/\$	Monthly/\$		
Public Housing Assistance/Section 8 (Section 8 Allotment Statement)	Monthly/\$	Monthly/\$		
CalWORKS: Welfare/TANF (CalWORKS Benefit Amount Statement)	Monthly/\$	Monthly/\$		
CalFresh: Food Stamps (CalFresh Benefit Amount Statement)	Monthly/\$	Monthly/\$		
Child Support (Letter with Amount of Support)	Monthly/\$	Monthly/\$		
Disability (Annual Disability Statement or Supplemental SSI)	Monthly/\$	Monthly/\$		
Alimony (Letter with Amount of Support or Form Schedule 1, Line 11)	Monthly/\$	Monthly/\$		
Other Income (Explain)	Monthly/\$	Monthly/\$		
TOTAL INCOME	\$	\$		
	Family Assets/Expense	S		
Residence Own L	ease/Rent	Federal Housing S	ection 8 Housing	
☐ With Relatives/Friends ☐ T	emporary Housing/Shelter	Homeless	)ther:	
   Monthly Mortgage/Rent:   If residing with I	Relative/Friend	Is your home currently in fo	oreclosure or shortsale?	
\$ Monthly Contril	oution \$	Yes No		
Vehicle(s)         1. Year:				
2. rear iviane: ivione	infolicity rayment: \$	Kemaining Months to Pay		

## TAP Policies and Procedures (2024-2025)

All CEF Tuition Award Programs are designed to assist students in the Archdiocese of Los Angeles with tuition for enrollment in a Catholic school within the Archdiocese of Los Angeles. The award partially offsets the cost of tuition in a Catholic school with grants paid directly to the Catholic school after verifying student enrollment in the Fall and Spring of the school year. All information submitted in this application is confidential and used for the purpose of determining eligibility for a CEF Tuition Award and data research. By signing the application, you grant CEF permission to use the information on this application and to gather additional personal, private information from the attending school concerning the student and your family or to contact you, the applicant, and the attending school to verify the information and/or develop data for educational and research studies, and analysis. You agree to waive and release CEF from all claims in connection with this research. In addition, you grant CEF permission to request and collect additional data, including test scores related to reading and math, ITBS, PSAT, SAT, AP, ACT test scores. You also grant CEF permission to request and collect tuition rates, GPA, report cards, transcripts, college acceptance, college attendance and data available concerning post secondary education as well as any quantitative and qualitative data on this applicant from such institutions and other resources. CEF will hold this information in confidence and release the name of the applicant or the family name only with your expressed permission.

#### The following terms and conditions apply without exception:

- 1. A student may only receive one tuition award from CEF per school year.
- 2. Tuition awards are not guaranteed. CEF reserves the right to deny eligible applications due to budget limitations.
- 3. CEF tuition awards are non-transferrable.
- 4. All students receiving tuition awards must be enrolled and regularly attending their Catholic schools upon fall and spring enrollment verification. CEF reserves the right to withdraw tuition awards for students who do not meet these conditions for the remainder of the semester and/or school year.
- 5. For Mail-In Applications: Applications mailed directly to CEF from an applicant will not be accepted or reviewed. All applications must be completed and returned to only participating Catholic schools with acceptable proof(s) of income.
- 6. For Virtual Appointment Applications: All applications must be completed and submitted to a CEF representative at and during the virtual appointment with acceptable proof(s) of income. Any Award letter emailed after the virtual appointment is predicated on CEF receiving a Principal Recommendation for the applicant. If a Principal Recommendation is not received by the subsequent deadline for the given cycle of the applicant, CEF reserves the right to withdraw the award from the applicant.
- 7. Participating Catholic schools must submit all applications and required supplemental documents to CEF on or before the submission deadline. CEF reserves the right to reject applications that are incomplete and/or received after the submission deadline.

Participating Catholic schools are under no obligation to submit an application to CEF if one or more of the following factors exist:

- Annual household income exceeds CEF's income guidelines.
- Applicants failed to meet school's internal submission deadline.
- Student does not meet the academic requirements to remain eligible for enrollment at the school.
- Student and/or family does not meet the service/volunteer requirements or expectations to remain eligible for enrollment at the school.
- Student is a recipient of an award from another foundation (ex. Rose Hills, Daughters of Charity, etc.).

### CEF Guidelines for Acceptable Proof of Income Documentation

(Submit all applicable documents)

- A. Page 1 of 2022 Federal Income Tax Returns (1040) Unobstructed View of Pages 1 & 2.
  - a. Filed Separately
    - i. If Legal Parent/Guardian A and Legal Parent/Guardian B file separately, both tax returns are required for the same tax year.
  - b. Dependents
    - i. If student is not a dependent of individual(s) on this application, please provide tax returns for individual(s) which student is a dependent.
    - ii. Please provide the supplemental sheet for dependents.
  - c. Tax Schedules
    - . Copies of all supporting tax schedules (including Schedule 1) if you have income on Line 8 of the 1040 Federal Taxes and from any of the following on Schedule 1:
      - Business (Form Schedule 1, Line 3 Submit Schedule C or C-EZ: Page 1, 2 & Other Expense Page).
      - 2. Capital Gains (Form 1040, Line 7 Submit Schedule D).
      - 3. Rental Property, Partnership, Trust (Form Schedule 1, Line 5 Submit Schedule E: Page 1 & 2).
      - 4. S-Corporation (Form Schedule 1, Line 5 Submit Schedule E: Page 2, Form 1120S).
      - 5. Farm Income (Form Schedule 1, Line 6 Submit Schedule F: Page 1).
- B. Cash Income
  - a. Notarized Statement of Income containing a list of the members of the household and the income of all individuals within that household signed and sealed by a Licensed Notary Public
- C. Copies of all supporting documentation for household Non-Taxable Income including Social Security Income, CalWORKS: Welfare/TANF, Child Support, CalFresh: Food Stamps, Workers Compensation, Disability, Alimony, Section 8: Public Housing
- D. All other official documentation to prove income listed on Page 2 of this application

## Agreement

Your signature below indicates that you have read and understand the CEF Policies & Procedures Page. The information provided on this application is true, accurate and complete, and legal proof of income has been provided. You understand that all information on this application will be verified. Any incomplete, missing, false and/or fraudulent information or documentation on this application, missing signatures, refusal to provide adequate/legal proof of income and/or any pertinent information required to process or determine a decision on this application will be cause for automatic denial of a tuition award.

In regards to my student's Post-Secondary Education data, I understand that I and my student have the right to (a) request a copy of any of their Educational Records disclosed to CEF under this consent by contacting CEF and (b) revoke my consent at any time by delivering written notice to CEF at Catholic Education Foundation, 3424 Wilshire Blvd. 3rd Floor, Los Angeles, CA 90010; programs@cefdn.org

Printed Name of Legal Parent/Guardian:	Signature:	Date: