



## **Tuition Relief Program Policy**

## **Local Policy 5710**

St. Michael's School Council is willing to offer tuition alternatives to families who are facing financial circumstances that may impede them from paying full tuition costs. Through its Finance Committee, it has set up a confidential process that reviews the eligibility of each applicant upon submission of the attached forms.

To participate in the Tuition Relief Program, families must indicate what portion of tuition assistance is requested and why. If approved for this program, a portion of tuition will be supported by Council. In turn, parents may be required to commit to an agreed number of volunteer hours for the school per school year.

A volunteer tracking form is attached to the application to be completed and signed by the Principal to confirm completed hours. Families who participate in this program and fail to deliver committed services will jeopardize their continuation in the Tuition Relief Program or possibly jeopardize their child(ren)'s enrollment. Those who by reason of special circumstances cannot fulfill their obligations must contact the Finance Committee for *special exemption*.

**The Tuition Relief Program does not apply to the annual fee of \$110 which includes books and materials as well as other programs with designated fees. No tax receipt will be issued for Tuition Relief volunteer hours.**

Please complete the Tuition Relief Application, and return the entire package to the school Principal. The Principal will privately submit the application to St. Michael's Catholic School Finance Committee for confidential consideration. The latest Income Tax Assessment for each parent is required in support of the Application.

**All financial information provided is strictly confidential and is used only to assess the merits of the application presented.**

**All Tuition Relief Applications are approved annually and must be re-applied for at the time of registration no later than April 1<sup>st</sup> of each subsequent year.**



## Tuition Relief Program Application Form

Family Name : \_\_\_\_\_

Address : \_\_\_\_\_

Phone: \_\_\_\_\_

Parish you regularly attend: \_\_\_\_\_

	Occupation	Employer	Number of years	Salary	Work Phone
<b>Father</b>					
<b>Mother</b>					

Children's Names	Grade	Year first enrolled at St. Michael's Catholic School



**St. Michael's**  
CATHOLIC SCHOOL

**For Discussion**

- a) How much tuition costs are you able to pay yourself? \_\_\_\_\_
- b) How much financial assistance will you be able to obtain from another source?  
(eg. Grandparents, family members, Godparents) \_\_\_\_\_
- d) Do you see your financial circumstances improving in the years ahead? \_\_\_\_\_  
If no, why? \_\_\_\_\_
- e) Please submit a letter to explain the nature of your financial hardships and why you should be considered for the Tuition Alternative program.
- f) Please submit the latest Income Tax Assessment for each parent in support of the Application.

**Tuition Tax Benefit**

Families are eligible to receive a tax receipt for the portion of tuition paid. If tuition is paid by other sources, the individuals who make the payment will receive the tax benefit.

Enter the total **monthly tuition** amount for your family. \_\_\_\_\_

Less the amount you can provide/month. - \_\_\_\_\_

Subsidy requested (monthly) = \_\_\_\_\_

Number of hours parents are available to volunteer in lieu  
of tuition paid based on a \$10/hour value. = \_\_\_\_\_

**Assets to the nearest \$1000**

Cash, Bank Accounts, etc. \_\_\_\_\_

Investments-Bonds, Shares, etc. \_\_\_\_\_

Business Assets \_\_\_\_\_

Automobiles \_\_\_\_\_

Home \_\_\_\_\_

**Liabilities to the nearest \$1000**

Mortgage \_\_\_\_\_

Automobile Loans \_\_\_\_\_

Other Loans \_\_\_\_\_

Credit Card Balances \_\_\_\_\_

**Net Worth** \_\_\_\_\_

*I am committed to provide the stated portion of tuition and to complete the volunteer hours required to meet my financial obligation. If within the school year my financial situation changes, I will notify the committee and reimburse the school.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



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## Tuition Relief Program Volunteer Tracking Form

Name: \_\_\_\_\_

Hours Required to Complete: \_\_\_\_\_

<b>Volunteer Duties</b>	<b>Date of Completion</b>	<b>Hours Completed</b>	<b>Principal Signature to confirm hours of completion</b>