



**Holy Rosary Parish School**  
**505 California Street**  
**Woodland, CA 95695**

(530)662-3494

FAX (530)668-2442

Web site: [www.hrsaints.com](http://www.hrsaints.com) ; e-mail: [office@hrsaints.com](mailto:office@hrsaints.com)



Dear Parents and Holy Rosary School Families,

The Holy Rosary School Scholarship Assistance Program provides financial assistance to parents and students who have a deep desire for a catholic school education. The program provides reduced tuition for those who cannot afford the full cost of such an education.

The application provides financial information that is needed in order to evaluate all grant requests on a fair and reasonable basis. The application is then submitted to a special committee appointed by the Pastor of Holy Rosary Parish to assist the school principal. No parents are permitted to serve on this committee in order protect the privacy of all applicants. The names of applicants and recipients as well as all information provided are held in strict confidence.

Applications must be answered completely and all additional information attached to the form. These must be received by the due date so proper, fair consideration may be taken of all applications. Requests for financial aid must be made each year. **There is no automatic renewal process. Applications are due at time of registration.**

Evaluations of applications will be based upon individual financial need and the amount of funds available each year. Grants will be made to those who have the greatest need first. Recipients will be notified in writing of the grant amount. Applicants will be asked to pay as much tuition as possible.

In order to participate in this program, applicants must meet the following criteria:

1. Indicate clearly a desire to have their children educated in the principals of the Roman Catholic Church;
2. Be registered, active members of Holy Rosary Parish ;
3. Demonstrate a legitimate financial need by submitting a copy of Federal IRS Form 1040 or 1040A with w-2s for the most recent tax year;
4. Submit a letter describing parish participation, reasons why they are interested in sending their child(children) to Holy Rosary School, circumstances that would effect the applicants ability to pay full tuition, and any other information that would assist the committee in its decision making process.
5. Recipients are expected to model their faith and their adherence to the teachings of the Catholic Church;
6. Recipients are expected to participate in actively in Parent Club and other school activities and complete Family Participation requirements (SCRIP & Volunteer Hours);
7. Recipients are expected to keep their tuition payments current through their FACTS accounts.

Any exceptions or exemptions to the above stated expectations must be approved by the pastor and/or principal. If at any time, a recipient of Scholarship Assistance can repay part or all of any grant, that money will be placed in a special fund to assist future families.

God bless,

SUZANNE C. HUGHES  
Principal



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**Financial Aid Application**  
**Academic Year 2006/2007**

*\* Complete application and attachments due at time of Registration. No automatic renewals.\**

**All sections are to be completed by a parent or guardian:**

1. Please check one: New Application: \_\_\_\_\_ Renewal Application: \_\_\_\_\_

2. Student(s):

Name: \_\_\_\_\_  
 (Last) (First) (Grade in fall) (Date of Birth)

Name: \_\_\_\_\_  
 (Last) (First) (Grade in fall) (Date of Birth)

Name: \_\_\_\_\_  
 (Last) (First) (Grade in fall) (Date of Birth)

3. Parish in which student resides: \_\_\_\_\_ Parish Registry #: \_\_\_\_\_  
 (# on your weekly envelopes)

\*4. Amount of financial aid granted previous year (if applicable): **\*REQUIRED: \$** \_\_\_\_\_

**Amount of financial aid requested: Specify amount - \*REQUIRED: \$** \_\_\_\_\_

*(Amount of financial aid requested does not guarantee that any amount will be granted.)*

5. Home address: \_\_\_\_\_  
 (Street)

\_\_\_\_\_  
 (City) (State) (Zip)

6. Marital status of natural parents: Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_

7. Custody of Child(ren): Mother \_\_\_\_\_ Father \_\_\_\_\_ Guardians \_\_\_\_\_ Other: \_\_\_\_\_

8. Father's Name: \_\_\_\_\_

9. Father's Employer: \_\_\_\_\_  
 (Company Name)

\_\_\_\_\_  
 (Street Address)

\_\_\_\_\_  
 (City) (State) (Zip)



**17. Please list total family annual obligations:**

1. Mortgage Payment/Rent/Utilities:

\$ \_\_\_\_\_

2. Food/Clothing/Medical/Dental/Credit Cards:

\$ \_\_\_\_\_

3. Automobile/Gasoline:

\$ \_\_\_\_\_

4. Other:

\$ \_\_\_\_\_

**Total Annual Obligations:** \$ \_\_\_\_\_

**18. Please list NET income: ALL income AFTER deductions for taxes, social security, etc.**

A. Father's Annual Salary: \$ \_\_\_\_\_

B. Mother's Annual Salary: \$ \_\_\_\_\_

C. Other Income – besides salaries:

\$ \_\_\_\_\_

**Total Annual Income:** \$ \_\_\_\_\_

**C O N F I D E N T I A L**

**Please attach a complete copy or copies of: (copies can not be made for you)**

\_\_\_ **Scholarship Assistance Application Letter – Letter must be typed or PRINTED CLEARLY.**

\_\_\_ **1040 Form(s) (IRS Federal Income Tax Return)**

*(Attach copies only – please make copies in advance;  
do not attach originals as copies will not be made)*

\_\_\_ **W-2 Form(s)**

*(Attach copies only – please make copies in advance;  
do not attach originals as copies will not be made)*

All applications and attachments, once submitted, become property of Holy Rosary School and will be kept in strict confidence. Evaluations will not be made without appropriate documentation and all sections **MUST** be answered **COMPLETELY** before request is considered. Current year tuition and payments **MUST** be up to date and registration completed before financial assistance is considered.

I hereby state that all information on this form is true and accurate to the best of my knowledge.

\_\_\_\_\_  
(Signature of Parent)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Parent)

\_\_\_\_\_  
(Date)