

**ABERDEEN CATHOLIC SCHOOL SYSTEM
OFFICE OF THE DEAN
1400 NORTH DAKOTA STREET
ABERDEEN, SOUTH DAKOTA 57401
(APPLICATION FOR FINANCIAL AID AND WORK GRANTS)**

Parent or Guardian Name(s): _____

Address: _____ ZIP: _____ Parish: _____

Father's Occupation: _____ Employer: _____

Mother's Occupation: _____ Employer: _____

If parents are Separated or Divorced – ANSWER NEXT 3 QUESTIONS:

With whom does the child live: _____

How much will the other parent contribute to tuition costs: _____

How much child support is received: _____

Indicate if one or both parents are deceased _____ If so, does the family or child receive Social Security Income? _____ How much? _____

List Children in Family: (Living at Home)

Name	Age	Grade (Next Year)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Do any children work? _____ Where: _____

When _____ How many hours _____ Salary _____

Adjusted Gross Income for 200700

Federal Income Tax for 200700
(Line 56 of IRS 1040; line 38 of 1040A; line 10 of 1040EZ)

Earned income credit received in 200700

Father's or Stepfather's earnings in 200700

Mother's or Stepmother's earnings in 200700

Earnings of any adult with whom you share domestic expenses00
(Include 2007 Federal Tax form)

Social Security benefits received for all family members in 20070.00

ADC or General Assistance 2007.....0.00
(Include year end statement)

Child Support received in 2007.....0.00

Housing Allowance0.00

Other Non-taxable income received in 2007.....0.00
(Include contributions to retirement programs and cafeteria plans)

Parent's cash on hand and in savings.....0.00

Retail value of your home.....0.00

Amount you owe on your home0.00

Stocks, bonds, investments0.00
(Exclude retirement accounts)

Value of your business0.00

Debts on your business0.00

Expenses:

Medical/Dental expenses paid in 2007.....0.00
(Include expenses not covered by insurance. You may include cost of medical insurance premiums you paid.)

Child Support paid out to a previous spouse in 20070.00

Elem. & Sec. Tuition paid in 07-08 school year0.00
(after any grants were subtracted)

Amount given to your church in 20070.00

Amount spent for childcare in 20070.00

How much can you contribute for your children's
education at our school next year?.....0.00

You May Use Additional Sheets for Further Information.
APPLICATIONS WILL NOT BE CONSIDERED WITHOUT YOUR
2007 INCOME TAX RETURN AND COPIES OF ALL W-2 FORMS.
 (These documents will be returned.)

All areas of this form need to be completed in order to be considered for financial aid!

Return this application by March 14, 2008.

I UNDERSTAND THAT I AM RESPONSIBLE FOR THE BALANCE OF TUITION NOT COVERED BY FINANCIAL AID AND I WILL PAY THIS AMOUNT IN A TIMELY MANNER. IF THESE CONDITIONS ARE NOT MET, ALL FINANCIAL AID WILL BE WITHDRAWN. I ALSO CERTIFY THAT THE INFORMATION PROVIDED ON THIS APPLICATION IS COMPLETE AND ACCURATE.

SIGNATURE OF FATHER OR GUARDIAN

DATE

SIGNATURE OF MOTHER OR GUARDIAN

DATE