

**APPLICATION FOR TUITION ASSISTANCE**

PARENT(S): \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

We plan to enroll our child(ren) at \_\_\_\_\_ for 2011-12 year.

(Name of School)

Children to be enrolled:

Grade

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

We have reviewed St. John's Policy on Christian Day School Education and agree to fulfill our obligations toward the spiritual development of our children through our active involvement in the life of the St. John's congregation.

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

\_\_\_\_\_  
(Parent Signature(s))

(For Office Use Only)

**Enrollment Confirmed:**

\_\_\_\_ Yes    \_\_\_\_ No

Date: \_\_\_\_\_

**Board Consideration:**

\_\_\_\_ Approved    \_\_\_\_ Denied

Date: \_\_\_\_\_

Parents Notified:

Date: \_\_\_\_\_

Check(s) Issued # \_\_\_\_\_ to:

\_\_\_\_\_  
Date: \_\_\_\_\_ Amount: \_\_\_\_\_

**Monitoring Record:**

\_\_\_\_ Quarter of \_\_\_\_\_:

WOR \_\_\_\_\_

SS/CON \_\_\_\_\_

\_\_\_\_ Quarter of \_\_\_\_\_:

WOR \_\_\_\_\_

SS/CON \_\_\_\_\_

\_\_\_\_ Quarter of \_\_\_\_\_:

WOR \_\_\_\_\_

SS/CON \_\_\_\_\_

\_\_\_\_ Quarter of \_\_\_\_\_:

WOR \_\_\_\_\_

SS/CON \_\_\_\_\_

