

## Bright Futures Fund and Soar with the Eagles Fund Scholarship Program Scholarship Application for 2016-2017 School Year

## Deadline for Applications APRIL 15, 2016

Parent/Guardian's  No. 100 Parent/Guardian's					
(First)		iddle Initial)	(Las	•	
			_ City:		
State		_	Zip:	<del></del>	
Are you Catholic? (please circle) YES NO					
Are you registered Parish name (if ap	•	(please circle) YES	NO		
2015 Adjusted G	ross Income &	/Or Other Income: \$_	Hous	ehold Size:	
have not yet filed a 2 BFF& SWE require *Household size inc Student Registr List the names of school year, and t	2015 Federal Tax s proof of public cludes you, your sp eation Information the child(ren) the name of the	Return copies of your currer assistance, social security, couse (if married), all childre ation  ) you are applying for, to eschool they are curre	hild support, and unemployment on under 18, and any elderly parenthe grade they will be enterenthy attending.	compensation (if applicable) its that live with you. ring in the 2016-17	
1.		_ Grade 2010-2017	Current School:		
2		Grade 2016-2017:	Current School:		
3		Grade 2016-2017 _	Current School:		
Please provide int	formation abou	it other child(ren) in yo	ur family.		
	Aae:	Grade: 2016-2017:	School Attending:	:	
		(if applicable		(if applicable)	
2	Age:	' ''	School Attending:	• •	
		if applicable		(if applicable)	
3	Age:		School Attending: _		
		(if applicable	2)	(if applicable)	

Please describe why receiving this scholarship for your child(ren) is	important?
Please share any additional information regarding your family that you review committee to know.	ou feel important for the scholarshi
Conditions of Ongoing Tuition Grant  I promise to pay my child's school account in a timely and responsible manner.  I certify that all financial information provided to school and BFF & SWE to detent best of my knowledge. I agree to provide proof, if asked, that the information of failure to do so will result in a loss of the tuition grant.  I promise to ensure at least 90% daily attendance of my child(ren) or risk losing.  I promise to provide re-qualification information as required every Spring to enchild(ren) through his/her 8th grade year.  I agree to allow my child's school to provide academic performance information the information remains confidential.	given to school is true and acknowledge that g the scholarship. sure this tuition grant continues for my
I certify by my signature below that the information I am providing to Bright Futures accurate and true to the best of my knowledge. My signature also confirms that I have guidelines for the program. I understand that all of the above conditions must be me grant. I agree to allow my child's picture to be taken and used for promotional and further futures Fund, Soar With the Eagles Fund and St. John Francis Regis from any liability	ve read and understood the eligibility et by child/family to be eligible for the tuition undraising purposes. I agree to release Bright
Signature of Parent/Guardian:	_Relationship:
Date:	_Relationship:

REQUIRED DOCUMENTS!