



St. Regis Academy

Tuition Assistance Application for 2020-2021 School Year

Bright Futures Fund and Soar with the Eagles Fund Tuition Assistance Program

Tuition Assistance Application for 2020-2021 School Year

Deadline for Applications

Returning Families – Wednesday, March 11th

New Families – Friday, May 1st

*While applications will still be accepted until the start of school,
funds for tuition assistance are very limited after Friday, May 1st.*

Dear Applicant,

Thank you for your interest in St. Regis Academy! St. Regis Academy in partnership with parents, as the primary educators of their children, seeks to provide a Catholic Classical Liberal Arts Education centered on Christ. We seek to cultivate an environment that fosters a student's natural desire for Truth, Beauty, and Goodness. St. Regis Academy prepares students to think critically, reason logically, articulate clearly, and engage others persuasively. Our enrollment includes racial, ethnic, and economic diversity within the Body of Christ, providing a wealth of opportunity for students to grow in virtue by pursuing spiritual, emotional, and academic excellence.

Due to the support of our Parish and other generous donors, St. Regis Academy is proud to offer tuition assistance for families in need. Tuition assistance is awarded based on an agreed upon partnership between the applying family and the Academy. In order for our tuition assistance program to live long into the future, the Tuition Assistance Agreement is not a recommendation but a requirement. In efforts to safeguard St. Regis Academy, provide consistency, answer questions, and clarify the terms of this gift, families interested in tuition assistance must schedule a meeting with the principal. We ask that families who are not able to afford full tuition, offer their time and talent in return.

Again, tuition assistance is awarded based on financial need, availability, and parent commitment to the tuition assistance agreement. In order to operate within our budget, St. Regis is limited on the amount of tuition assistance we can give. Please prayerfully consider your request before applying.

If you have any questions regarding our tuition assistance program, or the application, please contact the Academy office at (816)763-5837 or email us at rfisher@regisacademy.org.

Robin Fisher, M.Ed.
Principal
St. Regis Academy
rfisher@regisacademy.org

Please note: Tuition Assistance Forms that are not filled out to completion will not be considered.

Applicant:

First Name:

Last Name:

Address:

Date of Birth:

Marital Status:

Relationship to Student:

Employment Status:

Employer:

Occupation

Religious Affiliation:

Place of Worship:

Co-Applicant:

First Name:

Last Name:

Address:

Date of Birth:

Marital Status:

Relationship to Student:

Employment Status:

Employer:

Occupation

Religious Affiliation:

Place of Worship:

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Additional Questions:

Please describe special circumstance related to your household that the Tuition Assistance Committee should be aware of. This information is confidential and will only be available to the Tuition Assistance Committee. (Attach an additional sheet, if necessary)

Parent Response Questions

(In order to continue our tuition assistance program, answers below may be shared or used for publication purposes. The scholar(s) and applicant's identity will not be revealed in anyway.)

Household Size

What financial sacrifices are you making or willing to make to enable your child(ren) to attend private school? (I.e. overtime, additional part time work, etc.) Please describe why receiving this tuition assistance for your child(ren) is important? (Attach an additional sheet, if necessary)

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Please share any additional information regarding your family that you feel important for the scholarship review committee to know. (Attach an additional sheet, if necessary)

Taxable Income:

Does the applicant receive income reported on a W-2? Yes No

Does the co-applicant receive income reported on a W-2? Yes No

Does the applicant file a U.S Federal Income Tax Return? Yes No

Applicant's adjusted gross income from the most recent tax return:

Does the co-applicant file a U.S Federal Income Tax Return?
Yes – files jointly
Yes – Files separately
No

Do you own any of the following?

Business	Yes	No
Rental Property	Yes	No
Partnership	Yes	No
Farm	Yes	No
S Corporation	Yes	No
Estates and Trusts	Yes	No

Nontaxable Income

If you collect any nontaxable income, please notate it below

Alimony received

Child support

Temporary assistance for needy families (TANF)

Welfare

Supplemental Nutrition Assistance Program (SNAP)

Tuition support from friends/relatives/employers

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Workers Compensation

Housing Allowance (Military, Religious, Parsonage. Etc.)

Tax-exempt interest

Other nontaxable income (Foster care allowance, VA benefits, etc.)

Social Security

If household members collect nontaxable social security income, please indicate it below

Name : _____

Name : _____

Change of Income:

Do you anticipate a decrease in your annual income for 2020?

Yes

No

Monthly Expenses:

Do you rent or own your primary residence?

Rent

Own

Monthly rent or mortgage payment (Include principal, interest, taxes, and home insurance)

Do you own a second home (not including rental property)?

Yes

No

List all vehicles leased or owned, including any vehicle that does not have a monthly payment. Please do not include insurance expense.

Year	Make/Model	Monthly Payment

Please note: Tuition Assistance Forms that are not filled out to completion will not be considered.

Credit Cards and Other Loans

Total Credit Card Debt

Total of all minimum amounts due on monthly credit card statements

Monthly student loan payments for family members no longer attending collage

Do you have other monthly loan payments (Do not include cell phone, utilities, or other living expenses) Yes No

Monthly alimony payments

Monthly child support payments

Heath insurance premium paid per month

Annual Expenses:

Annual vehicle insurance expense

Total annual out-of-pocket medical expenses not paid by insurance

Charitable contributions – Cash or checks per year

College Expenses

Number of family members attending college beginning this fall

Child/Day Care Expenses

Number of children for whom you pay child/day care expenses beginning this fall

Elder Care Expenses

Number of people for whom you pay elder care expenses

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Assets & Liabilities

Value of Cash, savings, and/or checking accounts

Value of stocks, bond investments, mutual funds, and/or certificates of deposit

Value of your 529 plan accounts

What is your expected contribution in 2020 to 529 plan accounts?

Value of retirement plan assets

What is your and/or your spouse's annual contribution to retirement plan assets?

What is the estimated value of your home?

What is the amount you owe for your home?

**Conditions of Ongoing Tuition Grant
(Please initial below)**

_____ I will pay my child's school account in a timely and responsible manner. Should an expected or unexpected delinquency occur, I will contact the business office within 15 days to discuss a repayment plan.

_____ I certify that all financial information provided to St. Regis, Bright Futures Fund, and Soar with The Eagles to determine our eligibility is true and complete to the best of my knowledge. I agree to provide proof, if asked, that the information given to school is true and acknowledge that failure to do so will result in a loss of the tuition grant.

_____ I agree to allow my child's school to provide academic performance information for my child to BFF and/or ACE with the assurance that the information remains confidential.

Please note: Tuition Assistance Forms that are not filled out to completion will not be considered.

I certify by my signature below that the information I am providing to Bright Futures Fund and Soar with the Eagles Fund is accurate and true to the best of my knowledge. My signature also confirms that I have read and understood the eligibility guidelines for the program. I understand that all of the above conditions must be met by child/family to be eligible for the tuition grant. I agree to allow my child's picture to be taken and used for promotional and fundraising purposes. I agree to release Bright Futures Fund, Soar With the Eagles Fund and St. Regis Academy from any liability in its efforts to provide this tuition grant.

Signature of Parent/Guardian: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

Send completed application along with proof of income to:
St. Regis Academy: FAX 816-966-1350
Questions, please call 816-763-5837
Or email: rfisher@regisacademy.org

REQUIRED DOCUMENTS!
PROOF OF INCOME (2019 Federal 1040 or W-2s plus income from any other sources)
MUST BE SUBMITTED WITH YOUR COMPLETED APPLICATION!

Please note: Tuition Assistance Forms that are not filled out to completion will not be considered.

St. Regis Academy

Tuition Assistance Agreement

Family Name: _____

In acceptance of the tuition assistance, I will complete the following requirements:

Initial next to each item

_____ I will ensure at least **90% daily attendance** of my child(ren).

_____ I will ensure that my child is seated in their classroom and ready for school by 8:00am each morning assuming **no more than five tardies per quarter**.

_____ I will complete the free and reduced lunch program form no later than August 31st.

_____ I will establish direct withdrawal with Smart Tuition. I will establish direct withdrawal from my bank/credit card to make all tuition payments.

_____ Your student's behavior will be reviewed on a quarterly basis. Student(s) with excessive write ups, detentions, or suspensions may lose their tuition assistance during the school year. Three or more office referrals within a semester may result in the loss of tuition assistance.

_____ I will share my time and talent with the school community. In addition to the twenty hours required by each family, I will contribute **a minimum of 2 hours of volunteer time quarterly**. A form will be sent to each family quarterly and must be submitted to the office quarterly.

_____ I will participate in one of the following fundraising events: Nascar (Fall) or Rock Fest (Spring)
Your participation in these events translates directly into dollars for St. Regis Academy. In order to ensure your attendance, please choose one of the options below

_____ I would like for \$25 to be added to my monthly tuition bill. (At the end of the year, this can be carried over to assist with registration for the following year)

_____ \$250 Cash deposit.

All tuition assistance grants are reviewed on a quarterly basis. Those families who do not meet the requirements of the tuition assistance may not qualify for the entire tuition assistance amount.

Your tuition assistance award will NOT be applied to your account until this form is received in the office. Tuition assistance will be applied to your account on a semester basis.

Signature of Parent/Guardian

Date

Signature of Parent/Guardian

Date