

THE FOUNDATION FOR THE ADVANCEMENT OF CATHOLIC SCHOOLS

Education, Character, Faith, Success for Your Child

Dear Parent(s) and Guardian(s),

Thank you for your interest in applying for a Foundation for the Advancement of Catholic Schools (FACS) scholarship. By way of background, FACS was founded in 1983 and its mission is to support and assist the parish schools and the Archdiocesan High Schools by providing funding for scholarships and special projects. The Foundation believes that Catholic schools provide an “education for a lifetime”, especially for the poor and underserved children and youth of the Archdiocese of Hartford. FACS’s scholarships are made possible by many generous donors who, like us, believe that our schools provide students with an outstanding, values-based education.

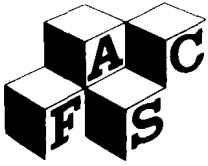
The Foundation prides itself in choosing deserving students to receive FACS scholarships. We are looking for qualified students who show academic promise and are dedicated and committed to receiving a Catholic education. We are hopeful that your student will have the opportunity to benefit from one of the many scholarships the Foundation provides.

Enclosed please find a FACS scholarship application for your review and consideration. We would appreciate it if you will read all the questions carefully and provide responses in the spaces provided. The FACS Distribution Committee receives many applications, so please insure that you have provided all the requested information. All the information provided on the application is and shall remain confidential. **The Committee will not consider any applications that are incomplete.**

Thank you for your interest in FACS. If you have any questions concerning the enclosed, please do not hesitate to call our office at (860) 761-7499 or email us at mdussault@facshartford.org

Sincerely,

The FACS Distribution Committee



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Michele and Donald D'Amour Scholarship Application 2018-2019

Name of High School _____

Applicant Information:

Student's First Name: _____ Middle Initial: _____ Last Name: _____

Parent(s)/Guardian(s): _____

Home Address: _____ City: _____ Zip: _____

Phone: (____) _____ Birthdate: ____/____/____ Gender: Male Female

Current Grade: _____ Religion: () Catholic () Other Christian () Other: _____

Ethnic background: () Native American () Asian () African American () Hispanic/Latino () Pacific Islander () Caucasian-White/Other () Filipino () Multi-Racial () Decline to state

Family Information:

Applicant lives with (Check all that apply): () Mother () Father () Grandparent(s)

() Step-Parent () Guardian () Foster Parent

Total number of people in family: _____ Total number of dependents under 18 years old: _____

Total number of Adults (18+) in the family who are dependents: _____

Total number of Adults (18+) in the family who contribute financially to the household: _____

How many children from this family are not of school age (Infants/Toddlers)? _____

How many children from this family are presently enrolled in Catholic elementary school _____

Catholic high school _____ Public elementary school _____ Public high school _____

Charter/Magnet elementary _____ Charter/Magnet high school _____

College/University _____ Work full time _____ Unemployed/Dependent not in school _____

Financial Information: (Income)

Parent/guardian 1: () Mother () Father () Grandparent(s) () Step-Parent () Guardian () Other

Employment Status: () Employed () Homemaker () Unemployed () Retired () Permanently

Disabled () Temporarily Disabled () Student

Employer Name and Occupation: _____

Annual Salary: \$ _____

Parent/guardian 2: () Mother () Father () Grandparent(s) () Step-Parent () Guardian () Other

Employment Status: () Employed () Homemaker () Unemployed () Retired () Permanently

Disabled () Temporarily Disabled () Student

Employer Name and Occupation: _____

Annual Salary: \$ _____

Does the parent/guardian receive alimony? () YES () NO If yes, how much annually? \$ _____

Does the parent/guardian receive child support? () YES () NO If yes, how much annually? \$ _____

Does anyone in your family, other than parent/guardian, receive AFDC, Social Security, Unemployment and/or Disability? () YES () NO If yes, who: _____

(Check one): () AFDC/Welfare () Social Security () Unemployment () Disability

How much annually? \$ _____

Do you own income property? () YES () NO Annual property income: \$ _____

Has the student received a FACS scholarship before? () YES () NO If yes, how much? _____

The Foundation for the Advancement of Catholic Schools Program Policies, Guidelines & Restrictions

FACS is designed to assist students in the Archdiocese of Hartford with tuition for enrollment in Catholic schools. The award partially offsets the cost of tuition in a Catholic school with grants paid directly to the schools.

The following policy applies to all applicants without exception:

- 1) All applications must be submitted from an Archdiocesan Catholic High School on the applicant's behalf. FACS does not accept applications directly from families.
- 2) Awards are not transferable to any private or non-Hartford Archdiocesan Catholic High School or to another diocese. Awards are paid directly to the schools and a credit is applied to the applicant's tuition.
- 3) This application must be returned completed with proof of income to the high school to which the applicant has been accepted and/or is registered to attend in the fall.
- 4) All applications must be submitted by schools on or before FACS deadlines.
- 5) FACS is under no obligation to review or accept any application that is incomplete, illegible, unsigned, lacks required signatures and/or has not provided adequate proof of income.

Archdiocesan Catholic Schools are under no obligation to submit this application unless the following Criteria has not been met:

- 1) Student has applied for financial aid and is an accepted student at an Archdiocesan High School.
- 2) Student has demonstrated financial need as supported by the determination of the High School.
- 3) Student meets academic requirements to remain enrolled in school.
- 4) Student meets the criteria of the scholarship applied for as spelled out in the Criteria and Guidelines documentation for each scholarship.
- 5) The application must be submitted by the FACS or school internal deadlines.

FACS Policy for Proof of Income:

- 1) This year's current and completed income tax returns (Form 1040, 1040A or 1040EZ), OR
- 2) Last year's completed income tax returns plus this year's W-2s.
- 3) If a family member has not worked anytime during the last 12 months, they must provide the school with a formal and legal notice/action or layoff status, disability benefits, unemployment benefits, and/or welfare benefits, and court order of legal separation/divorce for spousal or child support.
- 4) If another form of proof of income is used, please explain in detail (Example: check stub, letter from employer, etc.)

Please check all the financial documents submitted:

- | | |
|---|---|
| <input type="checkbox"/> Completed Income Tax Returns (most recent)** | <input type="checkbox"/> Social Security |
| <input type="checkbox"/> AFDC/Welfare/Public Assistance Disability | <input type="checkbox"/> Unemployment Benefits |
| <input type="checkbox"/> SSI Death Benefits of Spouse or Parent(s) | <input type="checkbox"/> Other(s) – In Item 4 above |
| <input type="checkbox"/> W-2 Form (most recent) | |

****Submit Form 1040, 1040A or 1040 EZ only – Do not include schedules – Delete all but last 4 digits of ALL Social Security Numbers included on tax returns**

Applicants most Recent Report Card must be submitted with this application
