THE FOUNDATION FOR THE ADVANCEMENT OF CATHOLIC SCHOOLS

92 Hopmeadow Street
Weatogue, CT 06089
860.325.5096

Dear Parent(s) and Guardian(s),

Thank you for your interest in applying for a Foundation for the Advancement of Catholic Schools (FACS) scholarship. FACS was founded in 1983 and its mission is to support and assist parish schools and the Archdiocesan High Schools by providing funding for scholarships and special projects. FACS believes that Catholic schools provide an "education for a lifetime". Our scholarships are made possible by many generous donors who believe that our schools provide students with an outstanding, value-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. This application shall apply to all scholarships that are available to your school for the academic year **2025-2026**. **Please review each page of this form prior to completing the application.** Answer every section of the application thoroughly using the spaces provided. Attach a second sheet, if necessary. You must provide all the requested information and required back-up documentation. All the information you provide will be kept confidential. **The FACS Distribution Committee will not consider any applications that are incomplete.**

Submit the completed application, including all required attachments, to your school by the due date established by your school. Your principal will add their statement and signature, signifying the application is complete. The SCHOOL will send your application to FACS by the deadline date established by FACS.

Thank you for your interest in FACS. Please call our office or email us at lschock@facshartford.org if you have any questions.

Sincerely,

The FACS Distribution Committee

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

The following applies to all applicants without exception:
1) Applications **must** be submitted to the schools by **their established due date**. The school shall submit the application to FACS on the applicant's behalf on or before the FACS deadline. FACS **does not** accept applications directly from families.
2) Awards are **not** transferable to any private or non-Hartford Archdiocesan Catholic School. Should a transfer occur mid-year, the award will be pro-rated for the time the recipient student attended the Archdiocesan School.
3) Awards are paid directly to the schools on the recipient's behalf.
4) This application must be returned completed with proof of income to the school to which the applicant has been accepted and/or is registered to attend in the fall.
5) FACS is under no obligation to review or accept any application that is incomplete, illegible, lacks required signatures and/or has not provided adequate proof of income.

Schools are under no obligation to submit this application to FACS unless the following has been met:
1) Student is an accepted or enrolled student.
2) Student has demonstrated financial need as supported by the determination of the school.
3) Student meets the criteria of the scholarship applied for as spelled out in the Criteria and Guidelines documentation for each scholarship.
4) The school receives a completed application by **their** established deadline for review and timely submission to FACS.

Acceptable Proof of Income documentation. Please check financial documents submitted:
1) **2024** completed income tax returns (Form 1040, 1040A or 1040EZ **only****),

<p align="center">**OR**</p>

2) **2023** completed income tax returns AND **2024** W-2 forms******.

3) If income has been affected by unemployment anytime during the last 12 months, proof of layoff or separation must be provided.

4) Other forms income such as Form 1099, retirement benefits, disability, welfare benefits, court order for spousal and/or child support, letter from employer, etc. Please explain below:

**DO NOT send entire tax return – Form 1040 is a 2-page document.
Delete all but last 4 digits of SSN on Form 1040

Applicants most Recent Report Card must be included with this application

Notification will ONLY be made to the awarded recipients and their respective schools.
FACS does NOT send notification to the applicants who were NOT chosen as recipients.

THE FOUNDATION FOR THE ADVANCEMENT OF CATHOLIC SCHOOLS
Scholarship Application   2025-2026

Archdiocesan School:_____

Applicant Information:

Student's First Name:_____Middle Initial:_____Last Name:_____

Parent(s)/Guardian(s):_____

Home Address:_____ City:_____ Zip:_____

Phone: _____Birthdate:_____/_____/_____ Gender: ☐ Male ☐ Female

Religion: ☐ Catholic ☐ Other Christian: _____ ☐ Other:_____

Current Grade:_____(As of the date of this application)

Family Information:

Applicant lives with (Check all that apply): ☐ Mother ☐ Father ☐ Grandparent(s) ☐ Stepparent ☐ Guardian ☐ Foster Parent

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

How many children from this family are presently enrolled in:

Catholic elementary school _____ Catholic high school _____College/University _____

Financial Information: (Income)

1. **Parent/guardian** ☐ Mother ☐ Father ☐ Grandparent(s) ☐ Stepparent ☐ Guardian ☐ Other_____

   Employment Status: ☐ Employed ☐ Stay at Home Parent ☐ Unemployed ☐ Retired ☐ Permanently Disabled ☐ Temporarily Disabled ☐ Student

   Employer Name and Occupation:_____

   _____

   Annual Salary: $_____

2. **Parent/guardian** ☐ Mother ☐ Father ☐ Grandparent(s) ☐ Stepparent ☐ Guardian ☐ Other_____

   Employment Status: ☐ Employed ☐ Stay at Home Parent ☐ 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

   Do you own income property? ☐ YES ☐ NO Annual property income: $_____

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

   If yes, what is the name of scholarship?_____

Parental Statement (Include reasons for financial need and other pertinent information FACS should consider)

Your signature below - *please type in signature field if submitting electronically* - indicates that you have read, and you understand the FACS Scholarship Program Policies & Restrictions regarding this application (page 2), that the information you have provided is accurate and complete, that you have provided legal proof of income, and that you are aware that all information will be verified. Any false or misleading information on this application, missing signatures or refusal to provide any proof of income or any pertinent information will be cause for rejection of the application. You also give permission to the school where your student has been accepted or enrolled to share financial information with the Foundation for the Advancement of Catholic Schools.

Parent/Guardian Signature: _____

Print Name: _____ Date:_____

My signature on this application also signifies that I give FACS my permission to use any photos of my child in any of FACS' communications whether in print materials or on the FACS website. No last names will be used.

Initial here or *type if submitting electronically*, only if you **decline** FACS' permission to use any photos of your child. _____

Student Statement: (Tell us about yourself and why you want to attend your school. Younger students who cannot write a response themselves should dictate to their parent who will complete this section for them)

Student Signature :_____

Principal Certification:

Principal certifies that this application is complete: ☐ Yes

Does this family assist the school? ☐ YES   ☐ NO   If yes, how?

Please explain any unusual/special/emergency circumstances which might assist FACS in evaluating this application. Share things that will help us to better know the student and family situation.

This application is being made for the _____Scholarship(s)

Principal's Signature: _____