



2010-2011 FAMILY TUITION PLAN APPLICATION

Made possible through a partnership between Embracing Our Future and the Mississippi Valley STO

Child's Last Name: _____ Parent/Guardians' Full Names: _____

Address, City, State: _____

Phone: Home: _____ Work: _____ Cell: _____

Email: _____ Preferred Method of Communication: _____

Are you a supporting member of a local Catholic parish or other church? Yes No

If yes, which parish or church? _____

Are you currently employed by a Scott County Catholic School? Yes No If yes, which school? _____

Children attending Scott County Catholic schools in 2010-11:

Student Name _____ School _____ 2010-11 Grade _____

Student Name _____ School _____ 2010-11 Grade _____

Student Name _____ School _____ 2010-11 Grade _____

Student Name _____ School _____ 2010-11 Grade _____

Your application cannot be processed without a copy of the front and back of your 2009 IA 1040 Iowa Individual Income Tax Form*. If the number of dependents living in your home is not the number shown on your tax return, or if there are any special circumstances we should be aware of, including any substantial differences between the income reported on your 2009 tax return and the amount you expect to report for 2010, please explain on the back of this form.

Please list below the monthly amount of income you are receiving that is not reported on your tax return such as:

Pension \$ _____ Food Stamps \$ _____ Child Support \$ _____
Alimony \$ _____ Disability Social Security \$ _____ Help from Family/Non-Family \$ _____
Disability \$ _____ Dependent Social Security \$ _____ Other Non-Taxable Income \$ _____

*If you did not file taxes in Iowa, please make note on your application and send a copy of your 2009 Federal 1040 tax form. If you are not required to file taxes, please list your household's monthly income from all sources, including wages and other earned income as well as all examples listed in the paragraph above, on the back of this form. Please provide verification of these amounts when possible.

The information included in this application is considered strictly confidential. The Educational Opportunities Act of 2006 helps to make this scholarship program possible. Scott County Catholic Schools are participating in a voluntary evaluation of the program's effectiveness. As part of that evaluation, a small number of families will be contacted to participate in a short survey to share their opinions.

If you are selected to be a participant in the evaluation, your personal information will remain confidential and will not be shared with anyone other than the evaluating agency. The evaluating agency will only use the information to compile an overall statistical report on the program. Your participation is not mandatory, but will be very helpful in ensuring that this scholarship program continues to be available to your child's educational needs, and the needs of future students.

[] I am willing to participate in a short survey if contacted. [] I would prefer to not participate in this confidential survey.

I request tuition assistance for my biological or adopted child/ren or ward(s) listed in this application. I understand that some grants provided through the Family Tuition Plan must meet income criteria established by the State of Iowa. I verify that the tax return accompanying this form is a true copy of the form that I have submitted to the Iowa Department of Revenue.

Parent/Guardian Signature _____

Date _____

Return this form with your 2009 IA 1040 tax form, to P.O. Box 1597, Davenport, IA 52809-1597. Please allow up to six weeks for processing once all proper information has been received.