



# ST HILARY PARISH FOUNDATION

2750 West Market Street \* Fairlawn, OH \* 44333

## **SUPPLEMENTAL FINANCIAL INFORMATION FORM 2023-2024**

Need-based scholarship applications cannot be processed until this form is completed. All information submitted on this form is confidential.

Name of Parent/Guardian \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

Marital Status ☐ Married ☐ Widowed ☐ Separated ☐ Divorced ☐ Single

Parish where you are a member \_\_\_\_\_

If you are NOT a member of St. Hilary, Guardian Angels or St. Victor Parish, check here ☐

Did you complete an application for consideration of Diocesan and St. Hilary tuition assistance?

☐ Yes ☐ No

List children in your family who are attending / or will be attending St. Hilary School

Full Name	Relationship	Grade Level 2023-2024
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### **ALL Lines in this section MUST be completed:**

1. Father's/ Male Guardian's annual Income (if he is in household) \$ \_\_\_\_\_

2. Mother's / Female Guardian's annual income (if she is in household) \$ \_\_\_\_\_

3. If remarried, provide your spouse's annual income \$ \_\_\_\_\_

**4. Add Lines 1,2, and 3** \$ \_\_\_\_\_

5. Annual income from (circle source(s)) Social Security, Child Support, Alimony, Welfare, veterans' Benefits, Workers' Comp, Unemployment Benefits. \$ \_\_\_\_\_

**6. Add Lines 4 and 5** \$ \_\_\_\_\_

7. Number of full-time working parents/ guardians in home

8. Total exemptions claimed on tax return –or– number of family members Living at home (if not tax return filed) \_\_\_\_\_

9. Annual rent/house payment including property taxes \$ \_\_\_\_\_

10. Amount of Tuition paid this year \$ \_\_\_\_\_

**11. Add Lines 9 and 10** \$ \_\_\_\_\_

**12. Subtract Line 11 from Line 6** \$ \_\_\_\_\_

13. Tuition Assistance Awarded

From Diocese \$ \_\_\_\_\_ From St. Hilary Parish \$ \_\_\_\_\_

Signature of Parents/Guardians \_\_\_\_\_ Date \_\_\_\_\_

**NARRATIVE SECTION – To be completed by Parent/Guardian**

Parent/Guardian: Please provide an explanation of why you are seeking assistance in the form of a need-based scholarship from the St. Hilary Foundation. Include all circumstances involved, i.e. unemployment, illness, death of spouse, etc.

This image shows a single sheet of white paper with horizontal blue or grey ruling lines, typical of notebook paper. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Return completed form along with Buehrle scholarship application by March 1, 2023 to:  
St. Hilary Parish Foundation \* 2750 West Market Street \* Fairlawn, OH \* 44333**

**Applicants for need-based scholarships must also complete the online FACTS tuition assistance application to be considered for scholarships.**