

Beatrice M. Eck Trust Fund for Catholic School Education

In Lycoming County, Diocese of Scranton Tuition Assistance Program

Guidelines for the 2017-2018 Academic School Year

Criteria:

1. At least one parent and any student(s) of the family desiring to attend Catholic schools must be a practicing Catholic and member of one of the six Lycoming County Parishes. The tuition assistance is for attendance at Catholic elementary and secondary schools located in Lycoming County. The tuition assistance award is non-transferable to other schools outside the geographical area.
2. The family must not otherwise be able to afford a Catholic school education.
3. The family and student(s) are required to participate in school fundraising, consisting of \$500 in raffle tickets per year and 10 volunteer hours. Any aid received will be withdrawn if the family discontinues participation in fundraising.
4. Applicants for tuition assistance from the Beatrice M. Eck trust fund **must also** complete the **FACTS Grant and Aid Application** online for student aid from the *Diocese of Scranton Scholarship Foundation*.

Directions:

1. Complete and sign this application form.
2. The **family must acquire the signature of their Pastor**, as indicated on the reverse side, before submitting the application.
3. Complete only one application per family. All completed applications should be submitted to the Finance Office, located at the high school campus at 901 Penn Street, Williamsport.
4. Application deadline is **March 31, 2017**.

FAMILY INFORMATION	
Father, Stepfather, or Male Guardian	Mother, Stepmother, or Female Guardian
Name	Name
Social Security #	Social Security #
Home Address	Home Address
City State Zip Code	City State Zip Code
Home Telephone	Home Telephone
Work Telephone	Work Telephone
Occupation	Occupation
Employer	Employer
Parish	Parish
Marital Status	Marital Status

(Over)

SIZE OF FAMILY - Please include family members who reside in the household during the 2017-2018 school year.

Number of Parents _____

Number of Children _____

PLEASE LIST ALL DEPENDENT CHILDREN
WHO WILL BE ATTENDING CATHOLIC SCHOOL FOR THE 2017/2018 SCHOOL YEAR

Name	Catholic School 2017 / 2018 attending or desired	2017 / 2018 Grade	2017/ 2018 Tuition

RECOMMENDATION OF PRINCIPAL AND PASTOR (Valuative criteria)

Parent/Guardian Signature _____

Date _____

Pastor's Signature _____

Date _____

Principal's Signature (Elementary) _____

Date _____

Principal's Signature (High School) _____

Date _____