

Lurline Jochum Charitable Trust

2017 - 2018 School Year Scholarship Application

Who Can Apply for Lurline Jochum Charitable Trust Financial Aid? In order to apply for Lurline Jochum Charitable Trust financial assistance, a student:

- Must be entering kindergarten through 8th grade in 2017-2018.
- Must apply for financial aid from Catholic Education Foundation by completing the FACTS management application and attaching a copy of the FACTS management application and all supporting documentation to this application by: **March 15, 2017.**

To complete this Application you will need to include:

- A copy of your FACTS management application.
- Detailed copies of all pages and Schedules of your **2016** Federal Income Tax Return Form 1040, 1040A or 1040EZ (**as filed with the IRS**) for individuals listed below in section A and B.
- Copies of all **2016** W-2 Wage and Tax Statement Forms, all **2016** 1099/1099R for Interest/Dividends, Pensions/Annuities and/or Misc. Income Forms for individuals listed below in section A and B.
- Documentation of TOTAL AMOUNTS received in **2016** for all Non-Taxable Income.
- Return, no later than **March 15, 2017** to: Business Manager, St. Leonard School, 440 Zorn Avenue, Louisville, KY 40206.

~ **IMPORTANT: Print clearly and neatly with a ball point pen** ~

A. Parent, Guardian or Other Adult *responsible for tuition*

Check one: Father Mother Stepfather Stepmother Other Adult

Last Name First Name MI

Social Security Number Age (_____) Home Phone Number

Address

City State Zip

(_____) Work Phone Number E-mail Address

B. Parent, Guardian or Other Adult *residing with parent A*

Check one: Father Mother Stepfather Stepmother Other Adult

Last Name First Name MI

Social Security Number Age (Area Code) Home Phone Number

Address

City State Zip

(Area Code) Work Phone Number E-mail Address

C. Dependents (*do not leave blank*)

Number of dependents who will attend a tuition charging school: daycare, Pre-K, elementary school, secondary school, or college in the fall of 2017. Please list all dependent children in order of oldest to youngest, including college students. Indicate each dependent's relation to Parent/Guardian A: child, foster child, grandchild, etc.

	Child 1	Child 2	Child 3	Child 4
Last Name				
First Name				
Middle Initial				
Date of Birth				
Social Security Number				
Grade in Fall of 2017				
Applying for Aid?	Y or N	Y or N	Y or N	Y or N
Name of School Student Plans on Attending in 2017-2018				
City/State				
Amount I/we can pay toward tuition				
Tuition charged per student				
Relation to Parent/Guardian A				

***Please return this application with the
AUTHORIZATION TO OBTAIN INFORMATION form
found on page 3.***

AUTHORIZATION TO OBTAIN INFORMATION

My child/children has/have applied into St. Leonard School for the 2017-2018 academic year. I wish for him/her/them to be considered for admittance into the scholarship program, sponsored by the Lurline Jochum Foundation. Because all assistance from the Foundation is based upon financial need, in order to permit the Foundation an opportunity to determine my child's/children's eligibility, I hereby provide the Foundation authorization to review and have full access to the Archdiocese of Louisville, Financial Aid Application Form that I have previously completed and provided St. Leonard School.

Furthermore, I hereby authorize any teacher, counselor, and Principal from any school my child/children has/have ever attended to discuss any and all aspects of my academic, social and disciplinary progress with representatives of The Lurline Jochum Foundation.

This authorization includes, but is not limited to, allowing the Jochum Foundation access to the following information:

Progress reports, report cards, results of all standardized tests, disciplinary reports and actions, the Archdiocese of Louisville Financial Aid Application Form and any other information germane to the scholarship recipient's success at St. Leonard School.

Name of Student(s): _____

Signature of parent(s) or guardian: _____

Date _____

AUTHORIZATION

I hereby give permission to the school principal/counselor to release information necessary to support my child's/children's application to the Lurline Jochum Foundation Scholarship program. If my child/children is/are selected as a recipient and attends St. Leonard School, my signature shall serve as authorization for the Jochum Foundation to receive copies of my child's/children's progress reports, report cards, standardized test scores and to discuss her progress at school with any and all officials at St. Leonard School.

Parent/Guardian Signature _____ Date _____