BISHOP McNAMARA HIGH SCHOOL

Request for Financial Aid for the 2008-2009 School Year

Please note that this application will not be considered until student is registered for the 2008-2009 school year and any obligations from the 2007-2008 school year have been fulfilled (including parent service hours).

Date of Application: _____

1. Student's Name: _____ Class of _____

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2. Party responsible for tuition/fees payment: ☐ mother/father ☐ mother ☐ father ☐ guardian ☐ other

3. Responsible Party's Name(s): _____

4. Responsible Party's Relationship to Student: _____

5. Address: _____

   _____

6. Home Telephone: (____) _____

7. If Catholic, name of Parish _____

Father/Guardian/Other (Responsible Party):

8. Work Phone: (____) _____

9. Occupation: _____

   ✓ One: Full Time ☐ Part Time ☐

10. Employer: _____

Mother/Guardian/Other (Responsible Party):

8. Work Phone: (____) _____

9. Occupation: _____

   ✓ One: Full Time ☐ Part Time ☐

10. Employer: _____

11. Dependent Children*:

Name	Grade (Sept. '08)	Schools that children will be attending in Sept. '08 & tuition costs if applicable

12. Have you applied for Archdiocesan financial aid for the 2008-2009 school year? Yes ☐ No ☐

13. Will you be receiving other tuition assistance for the 2008-2009 school year for one or more of your children? Yes ☐ No ☐ If you answered yes, please complete the following:

Organization/Foundation Providing Assistance	Amount

* **Dependent Children** are defined as minors living in the family home or at college but dependent upon family support

FINANCIAL AID APPLICATION PROCESS

1. This form along with the following items, must be received at Bishop McNamara by **March 14, 2008** for notification to be mailed by **April 30, 2008:**
    - a **SIGNED** copy of the your 2006 **1040 tax form** of the party responsible for tuition/fees payment **and (if different) party that lists child as dependent.**
    - a copy of your **2007 W-2 form(s)** of the party responsible for tuition/fees payment **and (if different) party that lists child as dependent.**
    - **3rd quarter grades if student is new to McNamara for the 2008-2009 school year**

2. This information will be reviewed by the school president and the chief financial officer. All information you give will be held in the strictest confidence. Notification will be mailed by **April 30th** for all applications received by **March 14th.**

Please explain in detail (you may attach extra pages if necessary) why you should qualify for financial assistance and provide any additional information that may assist the school in our determination of your eligibility. (Recommended that EVERYONE complete)

Responsible Party Signature(s): _____

_____

Make sure the following are attached:

- ☐ **SIGNED** copy of 2006 1040 form(s)
- ☐ Copy of **2007** W-2 form(s) or verification of income
- ☐ 2nd quarter grades if student is new to McNamara for the 2008-2009 school year

Mail to: President
Bishop McNamara High School
6800 Marlboro Pike
Forestville, MD 20747-3270