

WINTON WYOMING PASTORAL REGION **2017-18 FINANCIAL AID APPLICATION**

Purpose:

This financial aid application is intended to aid families in the Winton Wyoming Pastoral Region with students currently attending the parish school of John Paul II. The grant is awarded yearly, with applicants considered each year based on that year's applications.

Eligibility:

Financial aid will be awarded to families who are members of one the parishes in the Winton Wyoming Pastoral Region (Our Lady of the Rosary, St. James of the Valley, or St. Matthias the Apostle), have children attending the parish school of John Paul II, and have true financial need.

Qualified candidates should meet the following requirements:

- Be enrolled at John Paul II and in good standing.
- Must be eligible for in-parish tuition and receiving the parish subsidy.
- Be of good character and a solid member of the parish and the community at-large.
- Demonstrate compassion and a dedication through their acts of kindness and volunteerism.
- Have true financial need.

Applying for the award:

*Families <u>must complete the FACTS</u> financial aid application through John Paul II and students must complete the below application form and short answer questions in which they provide concrete examples from their experiences that demonstrate their commitment to serve as volunteers in the parish and/or community.

Other Details:

The financial aid award will be dispersed directly to John Paul II in the families' name. Families will be notified of the parish financial aid award each year.

Timetable: Application Deadlines: The FACTS application deadline is determined by JPII. The FACTS deadline for grants for the 2017-18 school year is January 31, 2017. The parish deadline is February 15, 2017.



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Please answer all questions with careful and accurate detail. Your responses are subject to verification.

Return the application and accompanying papers to the parish office.

PERSONAL INFORMATION			
Parish Affiliation (please circle or Our Lady of the Ro	•	nes of the Valley	St. Matthias the Apostle
Family Name			
Address			
Phone Number(s) (H)			
Email address:			
Name of Custodial Parent(s) or G	Guardian(s)		
Total Approximate Annual Family	y Income:		
Number in Household:			
Other information that would be	helpful in assessi	ng your need for fin	ancial aid:

Feel free to add additional pages if necessary.

SCHOOL/PARISH/COMMUNITY INVOLVEMENT

Activities (Please list and include leadership roles, if any): Volunteer/Community: Artistic or Athletic: Other extracurricular pursuits of importance to you: **Honors or Awards:** Other information of interest: