

# All Saints Catholic School

151 S. Grove Street Berlin, WI 54923 Phone: (920) 361-1781 Fax: (920) 361-7379

## Application: ASCS Tuition Assistance/Scholarship Fund

Parents Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Parish Membership \_\_\_\_\_

Total Number of Children \_\_\_\_\_

Number attending ASCS \_\_\_\_\_

Total annual Income \_\_\_\_\_

Marital Status \_\_\_\_\_  
2 Parent Family      Single w/ support      Single w/o support

Additional support received (grants, family support, etc.) \_\_\_\_\_

Application for Free or Reduced Lunch Program \_\_\_\_\_  
Yes / No

Please list any special circumstances. (Responses may be continued on the back)

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Why is a Catholic education important to you? (Comments by children encouraged)

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Signature \_\_\_\_\_ Date \_\_\_\_\_

FOR OFFICE USE ONLY
Student Achievements
_____
_____
GPA _____

*All Saints Catholic School offers a Christ-centered education that develops the academics, morals, and values needed for students to reach their full potential.*