OUR LADY of Joy
ROMAN CATHOLIC CHURCH AND PRESCHOOL

Please return this document before May 12th so that we can budget for the assistance.

W2 Financial Documents pages 1 and 2 are required to be submitted for application to be considered.

Guardian Angel Tuition Assistance Application

School year: 2024-2025

Date of request: _____

Amount of request requested: _____

Home Parish   _____

The Guardian Angel Tuition Assistance Program is a partnership between OLOJ Preschool and parents who desire a quality Catholic early childhood education but need financial assistance. Funds are available through community grants and generous donations from the preschool and parish. There are limited funds available each year, and to be considered, a confidential application must be submitted to the Director for review. A new application must be filled out for each new school year. This application and its entire contents are confidential. ==Families need to be an active and participating member of your home parish.==

Parents receiving tuition assistance are expected to volunteer for selected events when needed. This could be Time/Talent/Treasure Day, assisting with new parishioner event, volunteer dinner assistance or preschool events. Your tuition assistance is directly related to your participation with church and school.

Student Name_____ Age_____

Class enrolled in 2024-2025. Please place a check mark below.

PREK_____ Preschool_____ 5 days_____ 3 days_____

Parents/Guardian Information

Name_____ Home Phone_____

Address_____

Currently Employed? If so,
where?_____

Other Dependents

Name_____ Age_____School_____

Tuition paid by family each month?_____

Name_____ Age_____School_____

Tuition paid by family each month?_____

Name_____ Age_____School_____

Tuition paid by family each month?_____

Name_____ Age_____School_____

Tuition paid by family each month?_____

Are you receiving tuition assistance from other sources such as Empowerment Scholarship Account(ESA), Catholic Education Association (CEA), Student Tuition Organizations, for any of your children?_____

If so, in what amount?_____

Bills per month

Mortgage/Rent_____

Utilities_____

Vehicle payments_____

Credit cards_____

Student loans_____

Please give a brief explanation as to why you are requesting financial aid?

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Please know that we will try to assist you in the best way we possibly can. We have very limited funds

available each year and our wish is to help your family if you are searching for a Catholic preschool for

your family. Please answer the questions in the application truthfully and to the best of your knowledge.

Parent's signature_____ _____

Date_____

Approved_____ Amount_____ Date_____

Denied_____ Reason for denial_____

Date approved by Preschool Director_____