

**ST. BRENDAN PARISH & ST. MARTHA PARISH**

**CATHOLIC ELEMENTARY SCHOOL  
TUITION ASSISTANCE APPLICATION FORM  
ACADEMIC YEAR 2025-2026**

Financial assistance for elementary school student families comes directly from your fellow parishioners at St. Brendan parish or St. Martha Parish. Diocesan policy requires parishes without elementary schools offer about 6% of weekly budget collections for this purpose based on previous fiscal year. Because these funds are from parishioners it is important that the recipients be active, participating members of the parish community by offering time, talent, and financial support according to their ability. **Catholic Education begins in the home therefore recipients must also demonstrate that their household is practicing the faith through weekly Mass attendance and sacramental participation.** PLEASE NOTE: we do not award parish assistance until the FACTS information is received at the parish from the diocese, usually late May, early June and the after our fiscal year closes June 30. **Please do not expect to hear from us until August!**

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Please choose which parish you are registered.

St. Brendan Parish – Budget # \_\_\_\_\_  St. Martha Parish – Budget # \_\_\_\_\_

STUDENT INFORMATION (Please Print or Type) for all children attending Catholic Schools in 2025-2026.

Last Name	First Name	Grade:	School
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**2. PARENT/GUARDIAN INFORMATION**

**A. FATHER/GUARDIAN:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Address \_\_\_\_\_ Apt. \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Employer \_\_\_\_\_ Occupation \_\_\_\_\_

**B. MOTHER/GUARDIAN**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Address \_\_\_\_\_ Apt. \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Employer \_\_\_\_\_ Occupation \_\_\_\_\_

C. Marital Status: (circle) Married Widowed Divorced Separated

D. Children live with: (circle) Both parents Mother Father Guardian

E. Who has financial responsibility for children? Parents Father Mother Guardian

**CONTINUED ON BACK**

F. Have the Children received their sacraments according to their ages? (Baptism, First Eucharist, Reconciliation) \_\_\_\_\_

G. Are you a registered Member of St. Brendan Parish or St. Martha (circle) Yes No  
Please indicate Budget Number in the previous section.

H. Do all members of household attend Mass weekly? \_\_\_\_\_

I. Are members of your household involved with life of parish \_\_\_\_\_

J. Do members of your household contribute time and talent to church? \_\_\_\_\_  
Please indicate areas of participation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

K. Did you complete a financial aid package (FACTS) through the diocese? \_\_\_\_\_  
K1: What is the FACTS calculated need for the family \$ \_\_\_\_\_

Please explain any special circumstances, which result in the need of financial assistance that you think we should know: (Names and personal information will not shared with fellow parishioners or staff members)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I/We declare that the information reported on the form, to the best of my/our knowledge and belief is true, correct, and complete.

\_\_\_\_\_  
Father's / Mother's Signature

\_\_\_\_\_  
Date

**Assistance will be made via a promissory letter to the school. You will receive a letter informing you of the award amount as well. Funds are distributed directly to the school who will credit your account accordingly. Funds cannot be paid directly to a family. Award letters should be issued by August (pending FACTS information provided by the diocese).**