



CSGK TUITION INCENTIVE PROGRAM

The Catholic Schools of Greater Kalamazoo (CSGK) offers a financial incentive to families (or individuals) who refer new families that enroll a child or children in our schools for the first time. The incentive is in the form of one-time tuition credits.

1. Only one referring family per new family referred will receive the tuition credit.
2. The referring family is not required to have children currently or previously enrolled in CSGK. If the referring family does not have or will not have a child enrolled in CSGK at the time the tuition credit would be issued, see #6 below.
3. The tuition credit is \$2,000 for referring a new family to one of our three school (St. Augustine Cathedral School, St. Monica Catholic School, Hackett Catholic Prep High School).
4. A family may refer more than one family under the same conditions for additional tuition credit.
5. The referred family must complete the school year and pay their tuition obligation in full by the end of the school year in order for the tuition credit to be earned by the referring family.
6. If the referring family does not have a student attending CSGK at the time the tuition credit would be applied, they can either designate another family to receive the tuition credit or request a check for the tuition credit amount. If paid by check and the tuition credit is \$600 or more, a Form 1099-MISC will be issued to the recipient and filed with the IRS.
7. The referred family will identify the one family that will receive the tuition credit.
8. The referred family must submit a "Tuition Incentive Referral Form" to the CSGK Business Office by **emailing Michele Buchmann mbuchmann2csgk.org** or **mailing to P.O. Box 534, Portage, MI 49081-0534**, along with a completed CSGK New Student Enrollment Form and application fee.



TUITION INCENTIVE REFERRAL PROGRAM

To be completed by the Referred Family:

Last Name: _____

Parents /Guardians First Names: _____

Address: _____

Home Phone Number: _____

I have read the guidelines of the CSGK Tuition Incentive Program and hereby attest the following family has referred us to CSGK.

Signature: _____ Date: _____

To be completed by the Referring Family:

Last Name: _____

Parents/Guardians First Names: _____

Address: _____

Home Phone Number: _____

I have read the guidelines of the CSGK Tuition Incentive Program and hereby attest that I have referred the above family.

Signature: _____ Date: _____

For CSGK Business Office Use:

Date received: _____