BISHOP AMAT HIGH SCHOOL
APPLICATION FOR FINANCIAL AID
2027-2028 **Date _____**

To be eligible for Bishop Amat financial aid, the student must have a 2.0 or higher grade point average. Incoming 9th grade applicants, please attach a copy of the student's first semester grades. **Proof of income: completed 2025 Federal tax return, 2026 W2's, 2 recent bank statements (all accounts), and a recent paycheck stub.** Application and supporting documentation **must be hand-delivered** to the Bishop Amat Finance Office. No electronic submissions will be accepted. A receipt will be issued at the time of submission. **Bishop Amat financial aid is need based. The maximum dollar amount of financial aid (all sources) is half the published tuition rate. Application deadline: Wednesday, February 3, 2027.**

Number in Household _____ Gross Income (W2 Box 5) _____ Desired Monthly Tuition Payment _____

Did you apply for assistance through the Catholic Education Tuition Award Program (CEF)? _____ Yes _____ No
Families who meet the Income Guidelines for CEF must apply to CEF in order to be eligible to apply for Bishop Amat financial aid.

No. of children attending a Catholic school _____ Total Annual Tuition _____

STUDENT INFORMATION			
First Name	Middle		Last Name
Street Address			
City	State	Zip	Student's Grade 2027-2028
School Currently Attending			Monthly Tuition
Grade Point Average	Student Lives with		
Student involvement in school/parish			

STUDENT INFORMATION (include siblings attending Catholic elementary school-use back if necessary)			
First Name	Middle		Last Name
Street Address			
City	State	Zip	Student's Grade 2027-2028
School Currently Attending			Monthly Tuition
Grade Point Average	Student Lives with		
Student involvement in school/parish			

Please provide extenuating circumstances as to why you need financial assistance:

_____

_____

_____

ANNUAL HOUSEHOLD INCOME (ALL SOURCES) – $$ AMOUNTS		
Employment	Unemployment	Pension
Disability	Rental Property	Soc. Security
Alimony	Child Support	Welfare/Food Stamps

PARENT/GUARDIAN INFORMATION		
First Name	Last Name	
Relationship to Student (circle) Mother Father Grandparent Step-Parent Guardian Foster Parent		
Marital Status (circle) Single Married Never Married Separated Divorced Widowed Domestic Partnership		
Address if different than student's		
Home Phone No.	Cell No.	Work No.
Email Address		
Employment Status (circle) Employed F/T Employed P/T Self-Employed Unemployed Disabled Retired Homemaker # hours wk ____ If unemployed or disabled for how long?		
Occupation	Employer	
Hourly Rate	Monthly Income	Annual Income
Parent involvement in school/parish		

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Occupation	Employer	
Hourly Rate	Monthly Income	Annual Income
Parent involvement in school/parish		

FAMILY EXPENSES	
Where does this family live? (circle) Own Home Rent Home/Apt. Homeless (Streets/Car) Living with Friend/Relative (provide relationship-mother/father/partner)_____	
Monthly Mortgage or Rent	Monthly Household Expenses
Is your home in foreclosure/short sale? Yes No	No. of students attending Bishop Amat

FAMILY VEHICLES				
Vehicle A: Make	Model	Yr	Mo. Payment	# mo left on loan
Vehicle B: Make	Model	Yr	Mo. Payment	# mo left on loan

Parent Signature _____ Date Submitted _____