

Due by: August 14, 2026

As an active, registered (for at least one year) and contributing member of St. Vincent Pallotti Parish, Wyandotte, recognized as a member *in good standing* with a child and / or children enrolled in a Downriver Catholic Elementary or High School, I make an application for tuition assistance.

***NAME OF THE STUDENT:** _____ **SCHOOL & GRADE NEXT YEAR:** _____

IF MORE THAN ONE STUDENT, FILL IN THEIR NAMES BELOW:

NAME OF THE STUDENT: _____ SCHOOL & GRADE NEXT YEAR: _____

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***PARENT(S) NAME:** _____

***ADDRESS:** _____

***CITY:** _____ ***ZIP:** _____ ***PRIMARY PHONE NUMBER:** _____

***EMAIL ADDRESS:** _____

CRITERIA ACCOMPLISHED: 20% x 5 CATEGORIES = 100%
Elementary School Max: \$1,000 per student* / High School Max: \$2,000 per student*
***Additional funds available under 3b & 3c**
No late applications will be accepted - All decisions are final

1) *ATTENDANCE – Our Family actively participates & fulfills our weekly Sunday obligation (40 weeks out of 52 weeks) Yes ___ No ___

If NO, please explain _____

2) * PARENT/GUARDIAN PARTICIPATION – I have been active in a parish ministry from **July 1, 2025 thru June 30, 2026:** Yes ___ No ___

List Ministry: _____

3) * STREET FAIR PARKING VOLUNTEER

a. **Volunteered for a minimum of 2 shifts:** Yes ___ No ___

b. (ALL DAY - 3 shifts - ADDITIONAL 10%) Yes ___ No ___

c. (Volunteer Chair – organized volunteers for an entire day – Additional \$200) Yes ___ No ___

List hours worked (parents & students) _____

4) *STUDENT PARTICIPATION – My child(ren) has/have participated in a parish ministry from **July 1, 2025 to June 30, 2026.** Yes ___ No ___

List Ministry: _____

5) *DONATIONS – Our Family have donated in weekend Stewardship (\$500 per year) and participated in CSA (\$200 per year) **July 1, 2025 to June 30, 2026**

Yes ___ No ___

If NO, please explain _____

***OTHER FINANCIAL AID** – Are you receiving or do you expect to receive any other tuition assistance from any other organization? Yes ___ No ___

If YES, please list organization and amount _____

***SIGNATURE OF PARENT**

***DATE**

Please send or hand deliver your completed application to the Parish office at:
St. Vincent Pallotti Parish | 334 Elm Street, Wyandotte, M 48192
Award letters will be mailed by August 22 to the family and to the school(s) of awardees.