



St. Mary/McCormick Catholic Academy

25-26 Financial Aid Application

The mission of St. Mary/McCormick Catholic Academy is to provide a safe learning environment which fosters academic excellence and spiritual growth in the Catholic faith; mind, body & soul.

Through the gifts from generous benefactors and our PTO, who are strong believers in the mission of our Catholic school, we are fortunate to announce a tuition assistance program for students attending St. Mary/McCormick Catholic Academy in **grades K-8** for the 2025-26 academic year. The tuition assistance is by application, which is available in the school office. Applications for the 2025-26 school year may be turned in to the school office in an envelope marked "The Pastor - Confidential."

The applicant/family must:

- 1) Be a registered parishioner at a Catholic parish and/or a current St. Mary/McCormick Catholic Academy family (Young 5's through Grade 7).
- 2) Have a strong desire to have your child educated in a Catholic faith-based environment and support the mission of the school and parish.
- 3) Fill out and return the 25-26 Financial Aid application with a copy of the first page of your Federal Tax form 1040 for the most recent year and an estimate for the 2024 tax year.
- 4) The student must have an academic record equivalent to an A, B or C grade point average, with exemplary citizenship and effort, either earned at SM/MCA or transferring from another school.
- 5) First consideration will be given to families who have also applied for *Archdiocesan Tuition Assistance Grant*.

The tuition assistance may be renewable with

- 1) Continued meeting of academic and citizenship standards
- 2) Continued parent support
- 3) Continued evidence of financial need

Questions? Please contact Principal, Mrs. Stephanie Weaver, (810-982-7906 ext. 106).

St. Mary/McCormick Catholic Academy Financial Aid Application

Complete both sides of this application and return to the school office in an envelope marked "The Pastor - Confidential". Also include the first page of your Federal Tax Form 1040 for the most recent year. Please also attach a typed paper, at least one page in length, about what Catholic education means to your family. Financial aid applications will not be considered without the above information.

Please attach a separate sheet of paper if additional space is needed to respond to or explain any extenuating circumstances that should be considered by the committee. All information is confidential.

PLEASE PRINT OR TYPE

Date: _____

Parent/Guardian Name(s):	Home Address (Address, City, State, Zip Code):
Phone Number(s):	Total Number of Dependents in Household:
Circle One: Catholic Non-Catholic	Name of Parish/Church you Attend:

List of children who will be attending St. Mary/McCormick Catholic Academy next school year (list names, DOB, and grade level they will be in next year)

Name(s)	Date of Birth	Grade Level (Next Year)
Child #1:		
Child #2:		
Child #3:		
Child #4:		

Anticipated Total Tuition for Next Year:

Amount of Financial Aid Desired:

Parent/Guardian #1 (Name):

Current Employer:	Employer Address:	Business Phone Number:
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Job Title:	Length of Employment:	
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Parent/Guardian #2 (Name):

Current Employer:	Employer Address:	Business Phone Number:
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Job Title:	Length of Employment:	
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HOUSEHOLD FINANCIAL INFORMATION

Annual Income	2024	2025 (Estimate)
Salary/Wages- Father/Guardian		
Salary/Wages- Mother/Guardian		
Interest/Dividends earned		
Net Profit (Loss) Business		
Alimony		
Child Support		
Pension		
Social Security		
All other household income		
TOTAL HOUSEHOLD INCOME		

CURRENT MONTHLY EXPENSES: (Exclude tuition, utilities, insurance premiums, etc.)

Type of Credit	Balance Owed	Monthly Payment
Mortgage/Rent		
Auto		
Auto		
Credit Card		
Credit Card		
Credit Card		
Credit Card		
Other		
Other		
Other		

Other information you'd like to provide (special circumstances, etc.) that the committee should consider when determining your eligibility for financial assistance:

***Please attach a typed paper, at least one page in length, about what Catholic education means to your family.**

We declare the information on this application to be true, correct and complete, to the best of our knowledge. We authorize the confidential use of this information by the Financial Aid Committee only for the purpose of determining our qualification of the Tuition Grant.

Student Signature **Date**

Father/Guardian Signature **Date**

Mother/Guardian Signature **Date**