

Christ King Parish Grade School Tuition Assistance Application

Financial Need Information:

The financial need for the Tuition Assistance Program of Christ King Parish is based on 175% of the government established standard of poverty. Additional allowances will be made only for those families having documentation of excessive medical expenses or other unusual circumstances.

The 2025 limits on gross income from all sources are:

<u>Household Size</u>	<u>Household income</u>	<u>Household Size</u>	<u>Household income</u>
2	\$37,012	6	\$75,512
3	\$46,637	7	\$85,137
4	\$56,262	8	\$94,762
5	\$65,887		

Student and family information:

Applicant's Family Name _____ Telephone _____

Father's Name _____ Mother's Name _____

Address _____ City _____ Zip _____

of Households: 1 2 More

Marital Status: Married Separated Divorced Single Widowed

Religious Affiliation _____ Church Affiliation _____

Church Attendance at Christ King: Weekly As able Do not attend Christ King

Volunteer Activities at Christ King:

Household size (list student applicants plus brothers and sisters financially dependent on the family):

Name Age Grade School

Financial Information:

Do you own your home? Yes No Market Value \$_____

Did you file a 2024 Tax return? Yes No

*** Please include a copy of 2024 tax return with this application. ***

Gross Monthly Wages	Family Member	Employer/Occupation	Actual 2025	Estimated 2026
\$_____	_____	_____	\$_____	\$_____
\$_____	_____	_____	\$_____	\$_____
\$_____	_____	_____	\$_____	\$_____

All other sources and amounts of 2025 family income (SSI, AFDC, Child Support, etc.)

_____	\$_____
_____	\$_____
_____	\$_____
_____	\$_____

List approximate monthly expenses:

Food \$_____

Property Rent/Mortgage \$_____ Property Insurance \$_____

Car Payment \$_____ Auto Insurance \$_____

UTILITIES:

Gas \$_____ Electric \$_____ Water \$_____

Telephone/Mobile \$_____ Internet/Cable-Satellite TV \$_____

HEALTH:

Medical \$_____ Dental \$_____ Vision \$_____ Other \$_____

Subscriptions_____

Other_____

**PLEASE ANSWER THE FOLLOWING QUESTIONS IN DETAIL
REGARDING YOUR FAMILY'S CIRCUMSTANCES TO BETTER
ASSIST US IN DETERMINING ASSISTANCE.**

For the School Year 2026-27

Please share why a Catholic education is a priority for your family.

What can you afford to contribute each month toward that education this year?

Tell us about the circumstances that make it difficult to contribute more.

Returning families should submit this form and most recent federal and state tax returns by April 1, 2026, Attn:

Director of Operations
Christ King Parish
2604 N. Swan Blvd.
Wauwatosa, WI 53226

Note: Personally Identifiable Information will be protected in accordance with the Privacy Act of 1974