

Supported Student Form

A parent or guardian must complete this form and have it signed by the pastor, and returned to the school no later than March 1, 2011. The timely completion of this form will enable the student(s) to receive the supported tuition rate for the next school year.

NOTE: The parish seal must be on this form.

School: _____ City/Town: _____

Parish: _____ City/Town: _____

Name of Parent/Guardian: _____

Parent/Guardian Address: _____

Parent/Guardian Phone Number: _____

(Home)

(Work)

Student(s): _____ Grade: _____

_____ Grade: _____

_____ Grade: _____

_____ Grade: _____

Parent/Guardian Signature: _____ Date: _____

This is to confirm that the above signed meet all three of the minimal diocesan Support Criteria which include:

- 1. Registration in a parish or mission;**
 - 2. Contributor of record in a parish or mission;**
 - 3. Active participation in the life of a parish or mission.**
- (As stated in the plan for "Diocesan Support of Catholic Schools in New Hampshire.")**

Pastor's Signature: _____ Date: _____

Please include the parish seal on this form.

(Please make a copy of this form for your files and return the original to the school by March 1, 2011.)