



Covenant Tuition Services

Covenanting to Serve Christian Schools as unto the Lord
www.cts-tuition.com

Contact us:
CTS
PO Box 111
Fulton, IL 61252
Mary: 563-219-8873
Fax: 815-589-3869
info@cts-tuition.com

Covenant Tuition Services' Statement of Confidentiality regarding Tuition Assistance Application information for the 2019-2020 Academic Year

To process your application for Tuition Assistance at Holy Angels School, each family must submit copies of their 2018 Federal tax return, all W-2s from their employers, and any of the following schedules if the schedules were filed with the family's form 1040: A, C, E, and / or F. If a family has not filed a tax return for 2018, please call Mary at 563-219-8873 to discuss what must be sent in place of the federal form 1040.

The purpose of all financial information submitted to Covenant Tuition Service (CTS) is solely for evaluating the ability of an individual family to pay tuition and their need for tuition assistance. This information will be kept secure and confidential with CTS. It will not be available to anyone outside of authorized staff at CTS and Holy Angels School. CTS's report is an objective third-party assessment of ability to pay to help the school in planning financial aid decisions.

Changes to Payment by Credit/Debit Card

If you would like to pay by card instead of by Check, CTS will be able to send you an invoice from PayPal where you can make your payment online without needing to give out your card number to CTS.

To receive a PayPal invoice, please fill out the next lines:

Name of Parent on Application: _____

Names of Child/Children applying to Holy Angels School: _____

Email to send invoice: _____

By signing below, I agree to pay the \$27.00 invoice from CTS to pay for processing this application. I also understand that an unpaid invoice will hold up the processing of this application.

Signature: _____

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Tuition Assistance for the
2019-2020 Academic School Year

Contact us:
CTS
PO Box 111
Fulton, IL 61252
Dan: 815-589-2439
Mary: 563-219-8873
Fax: 815-589-3869
info@cts-tuition.com

Holy Angels School

720 Kensington Place • Aurora, IL 60506 • Phone: 630-897-3613 • www.holyangelsschool.net

Due Date: April 30th, 2019

Parent/Guardian Name: _____

Phone: _____

Address: _____

Email: _____

City, State & Zip: _____

Names & Grades of children applying: _____

Number of persons in household: _____

Number of parents in household: _____

Household Income

1. 2018 Father's W-2 income: _____
(W-2 box 3; Do not include self-employment)
2. 2018 Mother's W-2 income: _____
(W-2 box 3; Do not include self-employment)
3. 2018 Social Security Benefits: _____
(Include total for all household recipients)
4. 2018 Child Support Received: _____
(Include total for all household recipients)
5. 2018 Military/Clergy Housing Allowance: _____
6. 2018 Non-taxable income: _____
(W-2 box 12; ADC; General Assistance; Food Stamps; others)

Household Assets

12. Household Adults' Cash on Hand: _____
(Total in all: Cash, Checking, and savings)
13. Value of Home _____
14. Value owed on Home: _____
15. Value of stocks, bonds, investments: _____
(Exclude retirement and pension accounts)
16. Value of other assets owned: _____
Circle type: real estate business farm
17. Amount owed on assets in #16: _____
18. Automobiles – year, make, and model: _____

Household Deductions

7. 2018 Medical/Dental expenses: _____
(Expenses not covered by insurance and premiums paid outside of an employer's plan. You must provide a Schedule A or an itemized list of expense.)
8. 2018 Child Support Paid: _____
(Total paid for children not in household)
9. 2018-2019 K-12 Tuition Paid: _____
(Total after all amounts paid on your behalf by others, grants, and gifts are subtracted. Don't include college tuition here, See question 22)
10. 2018 Church contributions: _____
(Include Schedule A or letter from the church)
11. 2018 Childcare expenses: _____
(Include Form 2441 or bill from provider)

Other Information

19. Additional sheets can be used to explain special circumstances if necessary for processing, such as medical hardships, changes in employment that will cause increase or decrease in income, etc.
20. List weekly unemployment amount for all unemployed household parents: _____
21. How much can you pay for your children's education at this school? _____
Do not enter \$0 or leave blank. Please enter a reasonable estimate. Be sure to indicate if you are listing a payment plan, i.e. monthly, quarterly, etc.
22. 2018 Household college tuition paid: _____
(Include Form 8863 or bill from college showing amount paid)

Complete form and send with the following **required** items:

1. Payment for processing (choose only one option)
 - a. Check/Money Order for \$25. **Do not mail cash**
 - b. PayPal invoice for \$27
2. Copy of **2018 Federal Tax Return**
3. Copy of **2018 W-2(s)** and self-employment schedules: C, E, or F
4. All other supporting documents listed for questions #3 to #22

Applications can be sent via one of three ways:

Mail: Covenant Tuition Services
PO Box 111
Fulton, IL 61252

Email: info@cts-tuition.com

Fax: 815-589-3869