Catholic Education Financial Assistance for St. Lawrence Registered Families 2022-2023

The Ceader Trust Fund Trustees are continuing to implement the program to provide financial assistance to registered members of St. Lawrence Parish whose children are enrolled in all forms of Catholic Education.

In order for the Trustees to continue the program for the 2022-2023 school calendar year, please obtain a copy of the "St Lawrence Catholic Education Enrollment Application Form" available in our vestibule via our ushers. Return the completed form to the Rectory Office no later than April 4, 2023 for consideration.

Thank you for your help in acquiring this necessary information.

Ceader Trust Fund Trustees

Application Deadline: April 4, 2023

Parishi	ioner's Name						
Addres	SS		City				
State _	Zip	EMAIL					
Home	PhoneC	Cell					
Note:	Only fill in name(s) of studen	t(s) for whom reimb	oursement i	s applicable			
1.	Student Name						
	Relationship to Registered Parishioner						
	Student Address		City				
	State Zip	Adult ema	ail				
	Home Phone	Cell Pho	one				
	Name of Catholic School for Enrollment Year 2020-2021						
	Birthdate	Age Gende	er	Grade Attending			
	Catholic School <u>currently</u> at	tending		Years Attended			
	School Address Zip			_City			
	Tuition for Upcoming Scho	ol Year	Sc	chool Phone			

Note: Only fill in name(s) of student(s) for whom reimbursement is applicable

Address			Lity		
		C	tity		
Zip					
		Adult email	-		
hone		_ Cell Phone			
Name of Catholic School for Enrollment Year 2020-2021					
e	_Age	Gender	Grade Attending		
School <u>currently</u> a	ttending		Years Attended		
Address		-	City		
Zip					
n for Upcoming School Year School Phone					
Student Name Relationship to Registered Parishioner					
Address		(City		
Zip		Adult email			
hone		Cell Phone			
Name of Catholic School for Enrollment Year 2020-2021					
te	_Age	Gender	Grade Attending		
c School <u>currently</u>	attending _		Years Attended		
Address Zip			City		
	te Address Zip coming School Year in name(s) of stude Name nship to Registered Address Zip phone of Catholic School f ate	te Age c School <u>currently</u> attending Address Zip coming School Year in name(s) of student(s) for with Name Name nship to Registered Parishione Address Zip Phone of Catholic School for Enrollment ate Age	te Age Gender c School <u>currently</u> attending Address Zip coming School Year School in name(s) of student(s) for whom reimburseme in name(s) of student(s) for whom reimburseme Name School Name School Name		

Note: Only fill in name(s) of student(s) for whom reimbursement is applicable

4.	Student Name Relationship to Registered Parishioner					
	Student Address	5			City	
	State	_Zip		Adult email		
	Home Phone			_ Cell Phone	۱	
	Name of Catholic School for Enrollment Year 2020-2021					
	Birthdate		Age	Gender	Grade Attending	4
	Catholic School	currently atte	nding		Years Atter	nded
	School Address	7:0	~		City	
	State Zip					
					ol Phone	
	Student Name _				ol Phone	
	Student Name _ Relationship to	Registered Pa	rishioner			
	Student Name_ Relationship to Student Addres	Registered Pa	rishioner			
	Student Name _ Relationship to Student Addres State	Registered Pa s _ Zip	rishioner		City	
	Student Name _ Relationship to Student Addres State Home Phone	Registered Pa s _ Zip	rishioner	Adult email Cell Phone	City	
	Student Name _ Relationship to Student Addres State Home Phone Name of Cathor	Registered Pa s Zip lic School for	rishioner	Adult email Cell Phone ent Year 2020-2	City	
	Student Name _ Relationship to Student Addres State Home Phone Name of Catho Birthdate	Registered Pa s Zip lic School for	rishioner Enrollmo	Adult email Cell Phone ent Year 2020-2 Gender	City 021	
	Student Name _ Relationship to Student Addres State Home Phone Name of Catho Birthdate Catholic Schoo	Registered Pa s Zip lic School for l <u>currently</u> atte	rishioner Enrollmo Age ending	Adult email Cell Phone ent Year 2020-2 Gender	City 021 Grade Attending_	nded

Note: Only fill in name(s) of student(s) for whom reimbursement is applicable

4.	Student Name					
	Relationship to Registered Parishioner					
	Student Address		Ci	ty		
	State	_Zip	Adult email			
	Home Phone		Cell Phone	۰		
	Name of Catholic School for Enrollment Year 2020-2021					
	Birthdate	Age	Gender	Grade Attending		
	Catholic School	currently attending		Years Attended		
				City		
tio	State Zip n for Upcoming School Year School Phone					
	Student Name Relationship to Registered Parishioner					
	Student Address	5	C	ity		
	State	_Zip	Adult email			
	Home Phone		Cell Phone			
	Name of Catholic School for Enrollment Year 2020-2021					
	Birthdate	Age	Gender	Grade Attending		
	Catholic School	l currently attending	3	Years Attended		
	School Address	7:		City		
		Zip				
itio	n for Upcoming	School Year	School	l Phone		

Additional information regarding parishioner: Current or past involvement in St. Lawrence parish (for example: Lector, Altar Server, Choir Member, PREP Volunteer, Member of Church Society)

Additional information regarding student: Current or past involvement in St. Lawrence parish (for example: Lector, Altar Server, Choir Member, PREP Volunteer, Member of Church Society)

Note: Upon student completion of the academic year, please submit the St. Lawrence Church request for Catholic Education Tuition Reimbursement" form, available in the Parish Office.

Office Use

1. Registered in St. Lawrence Parish

2. Regularly celebrate Saturday/Sunday Mass St. Lawrence Parish

3. Actively involved in St. Lawrence Parish

