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Dear Parent/Guardian,

Thank you for your interest in St. Jerome Early Childhood Center. Each school year, we assess our ability to offer scholarships to families seeking financial assistance which would allow their child/ren to attend our Early Childhood program with partial tuition assistance. The availability of funds varies from year to year. Limited funds will be available for the 2024-25 school year.

You will find our Scholarship Application attached. Please complete and submit this form as soon as possible. Applications will be processed in the order they are received, and scholarships will be awarded as soon as possible.

May God continue to bless the work we do in His Name.

Sincerely,

A handwritten signature in cursive script that reads "Holly Andrade".

Holly Andrade, Director
St. Jerome Early Childhood Center

St. Jerome Early Childhood Center, a Catholic community, provides a loving and accepting environment that fosters respect for all people by modeling Christian values as our children grow and learn.



Diocese of St. Petersburg
School-Based Tuition Assistance Application *
School Year 2024-2025

School Name: St. Jerome Early Childhood Center

1. Name of Parent(s)/Guardian(s): _____
2. Email contact: _____
3. Phone contact: _____ Cell Phone Home/Landline
4. Student is Catholic: ** Yes No
5. If Yes to question #4, please list family's parish affiliation:
_____ Envelope # _____
6. Name(s) and grade level of student(s) attending this Catholic School in the 2024-2025 school year:
a) _____ b) _____
c) _____ d) _____
7. How many people are living in your household? _____
8. Do you have additional children in other Catholic schools in the Diocese? Yes No
9. If Yes to question #8, please list their names, grades, and school attending in the 2024-2025 school year:
a) _____ b) _____
c) _____ d) _____
10. Do you have children in college that you are supporting? Yes No
11. If Yes to question #10, how many children in college? _____

**** Tuition amounts are based on the scholarship funds available. ****

Families will be required to pay a percentage of the tuition costs. Priorities are given to families who are registered and actively attending a Catholic Parish in the Diocese of St. Petersburg.

12. Do you plan to receive any other scholarships or other forms of tuition assistance from any source? Yes No

13. If yes to question #12, please explain the source and amount of tuition assistance.

14. Is your family receiving or eligible for the Supplemental Nutrition Assistance Program (SNAP) i.e., food stamps? Yes No

15. Our family's household income last year (2023) was:

(Please check one)

- Less than \$50,000 per year
- Between \$50,001 and \$100,000 per year
- Between \$100,001 and \$150,000 per year
- Between \$150,001 and 200,000 per year
- Between \$200,001 and \$250,000 per year
- Between \$250,001 and \$300,000 per year
- More than \$300,001 per year

16. Please explain any special circumstances (Income loss, medical expenses, care for an elderly parent, recent loss of employment, etc.) you believe are relevant to the review committee. You may attach additional information if necessary.

17. A copy of applicant's 2023 Tax Return must be attached for income verification.

- Yes, a copy of the 2023 Tax Return is attached.
- No, a copy of the 2023 Tax Return is not attached. Reason: _____

I. Terms and Conditions:

St. Jerome Early Childhood Center is solely responsible for determining the final aid award. Submission of the application does not guarantee receipt of financial aid. All decisions regarding tuition assistance are made by the school's review committee and are final.

II. Privacy and Security:

Information provided with this Application will not be shared with any third party without the prior consent of the individuals submitting this application. Access to the information shall be restricted except to the extent that St. Jerome Early Childhood Center staff must use the data to provide service to you. St. Jerome Early Childhood Center maintains physical and procedural safeguards to protect data from being accessed by any unauthorized parties.

III. Authorization:

I (we) accept and agree to be bound by the terms and conditions listed above and acknowledge that the information provided on this form is true, correct, and complete to the best of my (our) knowledge, and that I am (we are) authorized to sign this form and to disclose this information.

X _____

Applicant Signature

Date

X _____

Co-Applicant Signature

Date