



St. Hugh Faith Formation
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St. Hugh Religious Education Financial Assistance Application 2017-2018

This form is confidential, and must be completed by the parent/guardian requesting financial assistance. Funds are limited; decision is based on financial need.

Family Name _____

Names of Child(ren) and grade(s) in Religious Education Program _____

Address _____

Phone Number _____ Email _____

Parent/Guardian 1 Occupation

Place of Employment

Parent/Guardian 2 Occupation

Place of Employment

Estimated Yearly Household Income (check one)

- Under \$20,000 \$20,001-\$25,000 \$25,001-\$30,000 \$30,001-\$35,000
 \$35,001-\$40,000 \$40,001-\$45,000 \$45,001-\$50,000 \$50,001 and above

Number of children living in the home _____

Number of adults living in the home _____

Statement of Need: _____

Financial Aid form must be received by October 1, or within 2 weeks of registration, if after 10/1/17.

For Office Use Only:

Date Application Received _____ Date Family Notified _____

Determination _____

Approved by _____ Date _____