

Current Employment Information

Father's Place of employment _____

Position

Work Number

___ Full-time ___ Part-time

Length of employment? _____

Mother's place of employment _____

Position

Work Number

___ Full-time ___ Part-time

Length of employment? _____

Recipient Family Commitment: please fill in and initial

___ I agree to volunteer _____ hours for TCA lunches, custodial services, events, etc.

___ I agree to participate in all school fundraisers.

___ I understand that the financial aid will be pro-rated on the full tuition and applied to each payment in the form of discounted tuition. In no event will funds be paid by TCA to me.

NOTE: In order to receive financial support the completed application and your prior year's income tax return must be submitted to the school office.

For office use only

Date Application received _____

Reviewed by TCACP Supervisor on _____

Comments:

Amount approved: _____

Denied ___ Reasoning: _____

Supervisor Signature