

**FOR ST MATTHEW HSTM STUDENTS ONLY (DO NOT USE THIS FORM FOR GRADE SCHOOL or PRESCHOOL STUDENTS.)**

Complete one (1) form in full per student at HSTM for the 17-18 school year.

- 1.-To **TYPE** in your information, click the FILL & SIGN tab located in the ribbon of icons, then complete the below form.
- 2.-**SAVE** your completed Form.
- 3.-**REPEAT** the above 2 steps if applying for additional children at HSTM.
- 4.-**EMAIL** no later than the **3-8-17 deadline** to [plittle@stmatt.net](mailto:plittle@stmatt.net)
- 5.-**TITLE THE SUBJECT LINE:** **HSTM - Tuition Assistance Application and Pastor Recommendation Request.**  
(Application form accepted by email only.)  
Send **1 email with a separate attachment for each child** that you are applying for.  
(i.e. 3 children=1email with 3 separate attachments)
- 6.-Note the below form is for **HSTM** only. If you are also applying for students at St. Matthew Grade School (K-8), you will need to complete and attach the Grade School form in your email.

Saint Matthew Roman Catholic Church  
~Diocese of Peoria~  
**ST. MATTHEW PARISH TUITION ASSISTANCE APPLICATION FOR HSTM**  
&  
**PASTOR RECOMMENDATION REQUEST FORM**  
for the John Lancaster Spalding Scholarship

- I/We request a recommendation letter to be sent to the Diocese of Peoria from Fr. Robert Rayson for the John Lancaster Spalding Scholarship for the child (one child per form) listed below for HSTM.
- I/We are active member(s) of St. Matthew Parish & in good standing with the Church. In addition, we are applying for the St. Matthew Parish Tuition Assistance for HSTM.
- I/We verify we have no outstanding or delinquent fees to the parish or school.

**HSTM** 2017-2018 school year . . .

|   |   |
|---|---|
| _____ Parent(s)/Guardian Name(s)<br>_____ Address<br>_____ / _____ / _____ City/State/Zip | <b>Contact Info:</b><br>_____ Phone<br>_____ Phone<br>_____ Email |
|---|---|

Parish Family Acct # \_\_\_\_\_

\_\_\_\_\_ Child's Full Name (one child per request form) \_\_\_\_\_ 2017-18 HSTM Grade Level

\$ \_\_\_\_\_ = My/Our **2016 Church contributions** as stated on my/our Parish Contribution Record received/dated Jan. 2017 from the Parish office. (This amount is **not** to include tuition payments made.)

# \_\_\_\_\_ Volunteer hours = **Amount of Parent Volunteer Hours** of time donated to St. Matthew Parish in 2016.

2016 Description of Parent Volunteer Service Hours Performed to Parish: 1. \_\_\_\_\_ = hrs: \_\_\_\_\_

2. \_\_\_\_\_ = hrs: \_\_\_\_\_                      3. \_\_\_\_\_ = hrs: \_\_\_\_\_

4. \_\_\_\_\_ = hrs: \_\_\_\_\_                      5. \_\_\_\_\_ = hrs: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature                      Parent/Guardian/Signature                      \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date

PLEASE NOTE: THE ABOVE FORM IS FOR St. Matthew HSTM STUDENTS ONLY.