



400 Gleason Avenue
Council Bluffs, IA 51503

Parish Verification Form

School Copy

(One Per Family)

20____-20____ School Year

Section A: Family Information

Family Name _____

Parish _____

We are not members of one of the supporting Catholic parishes and are aware that we will be charged the non-parish tuition rate.

Section B: Student Information

Student Names

Grade

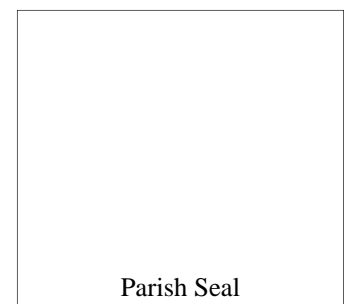
Parent Signature _____ Date _____

Section C: Pastor's Verification

This certifies that the above family qualifies for a tuition rate of:

Parish Rate

Non-Parish Rate



Parish Seal

Pastor Signature: _____ Date: _____

POLICY ON PARISH & NON-PARISH TUITION

Adopted by the Area Board of Education March 28, 1977

The established tuition for all in-school programs shall be of two types: Member parishes and non-member parishes.

1. To receive the parish member tuition rate, at least one of the student's parents or guardians must be a member of one of the parishes under the Board's jurisdiction. Those parishes are: St. Patrick Parish- Council Bluffs, St. Peter, Holy Family, Queen of Apostles, St. Patrick Parish- Neola, Holy Rosary in Glenwood, St. Columbanus in Weston, St. Patrick Parish- Missouri Valley.

The determining of a parish member shall be at the discretion of the respective pastors through annual Parish Membership Verification.

2. The non-parish rate shall be applied to all other students.

Section D: Parish Rate Qualification (Please make an appointment with your pastor to fill out this portion).

We thank you for choosing Saint Albert Catholic School System for your child's education. As your supporting parish, we will contribute an average of \$2,000 for the Catholic education of each child who attends Saint Albert during the 20____-20____ school year. We ask that you affirm your commitment to the religious education of your child(ren) by attesting that . . .

	Parents		Pastor	
	YES	NO	YES	NO
A We attend Sunday Mass at our parish regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B Our children attend Sunday Mass at our parish regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C Our family is involved in parish ministries and activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D Our family financially supports our parish.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Parent name (please print) _____

Parent Signature: _____ Date: _____

Section E: To Be Completed By Pastor

This certifies that the above family qualifies for a tuition rate of:

- Parish Rate
- Non-Parish Rate

Pastor Signature: _____ Date: _____