



**CLAYTON WEIS TUITION SCHOLARSHIP FUND**

**Application for Burlington Catholic School Families**

**\*K5 - 8th grade families must apply for Rewald & / or Choice (if eligible to apply for Choice)**

**Parent/Guardian Information:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Email/Phone:** \_\_\_\_\_

**Children's name(s) and grade for the 2026/2027 school year:**

\_\_\_\_\_ **Grade 2026/27** \_\_\_\_\_

\_\_\_\_\_ **Grade 2026/27** \_\_\_\_\_

\_\_\_\_\_ **Grade 2026/27** \_\_\_\_\_

\_\_\_\_\_ **Grade 2026/27** \_\_\_\_\_

**FINANCIAL INFORMATION:**

**Gross Income \$** \_\_\_\_\_

**Number of children attending Burlington Catholic School** \_\_\_\_\_

**Have you applied for other forms of aid (Rewald, Eckert, Choice)? Y/N** \_\_\_\_\_

**How much you feel you can pay per month \$** \_\_\_\_\_

**SPECIAL CIRCUMSTANCES / REASON FOR REQUESTING FUNDS**

\_\_\_\_\_  
\_\_\_\_\_

**I certify that the information provided is complete and accurate.**

**Signature of Parent or Guardian:** \_\_\_\_\_

**Signature of Principal:** \_\_\_\_\_ **Date:** \_\_\_\_\_