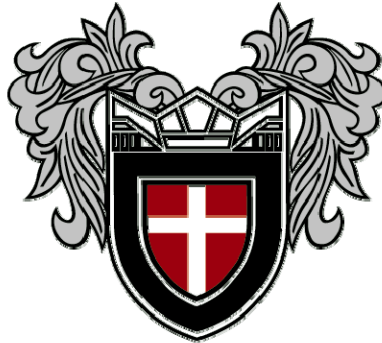


Student Name: \_\_\_\_\_  
Last Name First Name



# BISHOP WARD

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HIGH SCHOOL

## Financial Application 2010-2011

708 N 18<sup>th</sup> Street  
Kansas City, KS 66102  
913.371.1201 • [www.wardhigh.org](http://www.wardhigh.org)



# SCHOOL EXPENSES

Below is a breakdown of the school expenses you will be required to pay this school year. Please plan accordingly. Please call the business office at 913-371-0717 with questions.

| Expense                                     | Amount   | Deadline  |
|---|--|---|
| Enrollment Fee                              | \$100 per student or \$150 per family.                                       | To be paid at enrollment.                         |
| Tuition                                     | Varies. See financial commitment form for details.                           | Annually, biannually, or monthly plans available. |
| Book/Class/Activity Fee                     | \$310 for freshmen (estimated)   | August 1, 2010                                    |
| BWHS Uniform                                | \$19 per shirt<br>Students must wear the approved Bishop Ward uniform shirt. | Before the first day of class                     |
| Freshmen PE Shirt                           | \$10 per shirt   | Before the first day of class                     |
| Yearbook (optional)                         | To be Determined   | Can be purchased throughout the year              |
| Student Fundraiser 'opt-out' fee (optional) | \$200 per student or \$300 per family  | August 31, 2009                                   |



# 2010-2011 FINANCIAL CHECKLIST

## WHAT TO BRING TO ENROLLMENT:

- Enrollment Packet (for incoming freshmen and transfer students only)
- Financial Packet
- Application Fee: A non-refundable enrollment fee is due at the time of enrollment. The enrollment fee is \$100 per student or \$150 per family.
- Tax Return: If you plan to apply for financial aid, bring a copy of page one of the 2009 income tax return (1040/1040A/1040EZ and Schedule C and E) or other proof of income (see Financial Application for details) of the party responsible for child's tuition payments.
- A \$42 check or money order made out to Tuition Management Systems if you plan to pay for tuition on a monthly basis.
- Completed Scholarship Application (if you plan to apply), including essay and letter of recommendation.

## Financial Packet Directions:

1. Please keep all sheets stapled together.
2. Fill out all required forms completely (each form is labeled as either one per family or one per student).
3. Fill out the Tuition Management System form if you plan to pay monthly.
  - This is required if you choose the monthly payment plan.
  - Please sign in black or blue ink.
  - If you choose this option, a non-refundable \$42 user fee is due by check or money order at the time of enrollment. Please make checks payable to Tuition Management System.
  - Note: If you participate in the monthly payment plan, a late charge of \$40 will be assessed to your account if any payment is not received by the due date. Accounts delinquent greater than 60 days will be made inactive by TMS and require a \$30 reactivation fee or payment that completes the remaining balance.



# TUITION & FEE POLICY

The operation of Bishop Ward High School is tuition based; therefore, parental financial obligations are crucial to its smooth operation. We believe that our tuition payments are an investment in your child's education and religious formation.

The tuition and fees for Bishop Ward High School are approved annually by our Board of Trustees and Administration. It is the responsibility of the Board to ensure that adequate financial resources are available for the school and that enrollment is available and as affordable as possible to all families.

## **Tuition Payment**

Families who are registered and contributing members of any Wyandotte County Catholic Parish are entitled to the in-district tuition rate. All others will pay the Out-of-District tuition rate. All families shall be expected to make tuition payments according to one of the three following payment plans:

- A. **Annual payment:** Full payment by June 15 to the school.
- B. **Semi-annual payments:** The two payments June 15 and November 15 to the school.
- C. **Monthly payments:** The payments, either the 1st or 15th of the month, are made for 12 months from June – May. All monthly tuition payments are received and processed through Tuition Management Systems (TMS). TMS is the contracted provider by Bishop Ward High School for administering our tuition program.

## **Application Fee**

Both new and returning students will be required to pay a non-refundable application fee of \$100 per student or \$150 per family.

## **Late Enrollment (Enrollment after June 15)**

Tuition for students who enroll after June 15 shall be prorated according to the time remaining in the school year.

## **Tuition Refunds**

Families withdrawing students prior to the first day of school shall be refunded the entire amount of tuition, minus the registration fee, that has been paid for the current school year. After the first day of school, tuition refunds shall be prorated over the number of school days each student was in attendance.



# TUITION & FEE POLICY(cont.)

(One form per family)

## Tuition Delinquency

1. If tuition is not current by Student Orientation (in August), the student will not receive their schedule or be able to attend class.
2. If the monthly tuition is not received at Tuition Management Systems by the due date, it is considered late and subject to a \$40 late fee. Bishop Ward does not receive any portion of the late fees, therefore cannot waive the fee. Please contact Tuition Management Systems directly to discuss late fees by calling 1-800-722-4867.
3. After 30 days a warning letter will be sent from Bishop Ward High School.
4. After 45 days a phone call from a representative of Bishop Ward High School will be made. An additional late fee will be added on a monthly basis.
5. Any family whose account is delinquent or past due is subject to Financial Suspension. If Financial Suspension is imposed, the student will be asked to leave school until tuition and fees are current.
6. Bishop Ward has Attendance Interruption Dates four times a year (marked in School Calendar). Starting on those dates, students whose tuition is past due will be put on Financial Suspension until their account is current.
7. At the end of the second semester, if tuition is delinquent, the student will not be permitted to re-enroll until all past due tuition has been paid.
8. If tuition is delinquent for Seniors they will not be permitted to participate in year-end and graduation activities. Diplomas and final transcripts will not be released until obligations are paid in full.
9. Records will not be released to another school unless all financial obligations are current.

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

\_\_\_\_\_  
Date



# 2010-11 TUITION COMMITMENT FORM

(One form per family)

PARENT/GUARDIAN INFORMATION (Please print clearly)

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

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

Primary Phone (\_\_\_\_\_) \_\_\_\_\_ Primary Phone (\_\_\_\_\_) \_\_\_\_\_

Phone Type:  Cell  Work  Other: \_\_\_\_\_ Phone Type:  Cell  Work  Other: \_\_\_\_\_

Secondary Phone (\_\_\_\_\_) \_\_\_\_\_ Secondary Phone (\_\_\_\_\_) \_\_\_\_\_

Phone Type:  Cell  Work  Other: \_\_\_\_\_ Phone Type:  Cell  Work  Other: \_\_\_\_\_

E-Mail: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name of party responsible for tuition payment: \_\_\_\_\_

Names of Students Attending Bishop Ward:

|       |            |       |            |
|-------|------------|-------|------------|
| _____ | Grade ____ | _____ | Grade ____ |
| _____ | Grade ____ | _____ | Grade ____ |

TUITION/PAYMENT OPTIONS

There are two (2) tuition rates at Bishop Ward High School.

- In-District:** This rate is for families who are registered in a parish in Wyandotte County that supports Bishop Ward.
- Out-of-District:** This rate is for families who are not members of Wyandotte County Catholic Parishes.

Please check one option below:

|                    |  | <u>One Student</u> | <u>Two + Students</u> |
|--------------------|--|--------------------|-----------------------|
| <u>IN-DISTRICT</u> | Option 1 <input type="checkbox"/> Annual (Payment due by 06/15/10)                 | \$ 6,900           | \$ 11,600             |
|                    | Option 2 <input type="checkbox"/> Semi-annual (Payments due 06/15/10 and 11/15/10) | \$ 7,000           | \$ 11,775             |
|                    | Option 3 <input type="checkbox"/> TMS monthly payment program (\$592 a month)      | \$ 7,100           | \$ 11,950             |

Parish You Support (Required to qualify for In-District Rate): \_\_\_\_\_

|                        |  |          |           |
|------------------------|--|----------|-----------|
| <u>OUT-OF-DISTRICT</u> | Option 1 <input type="checkbox"/> Annual (Payment due by 06/15/10)                 | \$ 8,100 | \$13,475  |
|                        | Option 2 <input type="checkbox"/> Semi-annual (Payments due 06/15/10 and 11/15/10) | \$ 8,200 | \$ 13,575 |
|                        | Option 3 <input type="checkbox"/> TMS monthly payment program (\$692 a month)      | \$ 8,300 | \$ 13,675 |

We will be applying for financial aid.

The undersigned promises to pay Bishop Ward High School the total tuition commitment according to the options checked above and method of payment selected. Failure to comply with the terms of this agreement will result in the enforcement of the tuition and fee policy.

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

\_\_\_\_\_  
Date



# 2010-11 FINANCIAL AID APPLICATION

(One form per family)

Student Name \_\_\_\_\_  
Last First

### IMPORTANT FINANCIAL AID INFORMATION

Financial aid funds are available **but are limited**. To be fair to all Bishop Ward families applying for aid, the following information is required before aid can be determined:

- 1) A completed Financial Aid Application
- 2) A copy of the first page of your 2009 Federal Income Tax Form. The tax form is required to be considered for financial aid. You may submit your Financial Aid Application for processing but your financial aid will not be determined until the Business Office receives a copy of your tax forms.

### NAME OF PARTY RESPONSIBLE FOR TUITION PAYMENTS

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

Relation to Student: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employed By: \_\_\_\_\_

Make and Year of all Car(s) in family: \_\_\_\_\_

### FINANCIAL INFORMATION

2009 Gross Income\* \_\_\_\_\_ (ESTIMATE REQUIRED)

\*You must turn in a copy of the first page of your 2009 Federal Income Tax Form (IRS Form 1040, 1040A, 1040EZ and Schedule C & E) of the party responsible for tuition payments to the Business Office. Your application cannot be processed without it.

2009 Unreimbursed Medical Expenses\* \_\_\_\_\_ (ESTIMATE REQUIRED)

\*A copy of IRS Schedule A or other appropriate documentation must be turned in to the Business Office. Your application cannot be processed without it.

If for some reason you are not required to file a tax return, please explain the reason below. Include the amount and source of TOTAL Income for the 2009 calendar year (A late filing is not acceptable). Please attach any or all you have received of the following: W-2, one month's pay stubs, final pay stub for the year from each employer, proof of child support, and current hours worked per week (income verification is required).

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You will receive a letter in the beginning of May outlining your financial aid & scholarship amount.



# FINANCIAL AID APPLICATION (continued)

(One form per family)

### DEPENDENT INFORMATION

Provide information below for all dependent children, not attending Bishop Ward High School, including college students you will claim as federal tax exemptions.

| STUDENT NAME | AGE   | SCHOOL ATTENDING | ANNUAL EDUCATIONAL EXPENSE |
|--------------|-------|------------------|----------------------------|
| _____        | _____ | _____            | _____                      |
| _____        | _____ | _____            | _____                      |
| _____        | _____ | _____            | _____                      |
| _____        | _____ | _____            | _____                      |

### OTHER CONSIDERATIONS

Please state any other situation specific to your family that should be considered in determining the amount of financial assistance needed by your family.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I/We will be applying for additional financial assistance from other outside sources. Yes  No   
(i.e. – Grade school/Parish Scholarship, Loretto in KC Fund)

I/We certify and attest that this information and documentation is a true and accurate reflection of our family's picture relevant to the Bishop Ward High School Scholarship/Aid Program.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



# 2010-11 SCHOLARSHIP APPLICATION

(To be filled out by the student. One application per student)

The Bishop Ward High School Endowment scholarships are awarded based on financial need, scholarship, character and service. All recipients must re-apply each year.

- Participation in at least one extra curricular activity is required.
- Any tuition not covered by this scholarship, and books and fees remain the responsibility of the family.
- All students receiving these scholarships agree to participate in the student fundraising activities.

**Directions:**

1. Fill out the form below.
2. Attached a letter of recommendation from a current teacher, coach or principal. The letter should address your scholastic achievement, effort and character.
3. Write a one-page essay (typed) explaining your reasons for wanting to attend Bishop Ward. If you are a current student at Bishop Ward, write about your experience here.
4. Incoming Freshmen: This form must be completed and returned with the financial application by March 1, 2010 for the student to be eligible to receive any scholarships

Name of student: \_\_\_\_\_

School attended last year: \_\_\_\_\_

Please list any academic, extracurricular and service activities you have been involved in and the years in which you participated below.

Academic Activities: \_\_\_\_\_

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Extra-curricular Activities: \_\_\_\_\_

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Service to Church and Community: \_\_\_\_\_

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# 2010-2011 FEDERAL PROGRAM FORM

(One form per family)

The information you supply may allow Bishop Ward High School to obtain federal funds through several federally funded school programs, including the E-Rate program that helps schools fund Internet access for student learning.

Family Name: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street Address City State Zip code

Number of people living at this address: \_\_\_\_\_

What is your monthly income? Circle the income level below that applies.

- \$1,604 or less
- \$2,159 or less
- \$2,714 or less
- \$3,269 or less
- \$3,824 or less
- \$4,379 or less
- \$4,934 or less
- \$5,489 or less
- \$5,490 or more

Please list all students who will be attending Bishop Ward during the 2010 - 2011 school year.

Child's Name: \_\_\_\_\_ Incoming Freshman: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Current Grade at Ward: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Current Grade at Ward: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Current Grade at Ward: \_\_\_\_\_

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date



# STUDENT FUNDRAISING AGREEMENT

(One form per family)

Because tuition does not cover the entire cost of education, all students and parents must uphold a fundraising commitment each year to help fill the gap and supplement tuition costs. This fundraising commitment is student-driven with support and encouragement from parents/guardians.

Two fundraisers will take place during the 2010-2011 school year. **Full Participation in these fundraisers is a requirement of Bishop Ward.**

## Your student can ask you and others to reach their commitment goal.

Your student(s) can ask family, friends, neighbors and others in the community to purchase raffle tickets and make a donation in support of their education and goal. The Development Office is committed to helping your student(s) reach above and beyond their commitment. Collection packets, flyers, suggestions and reminders will be sent home with your student(s). All money is due no later than the last day of each fundraiser; dates to be determined. Below are commitment minimums (quota) for each fundraiser.

| <u>Fundraiser</u> | <u>Event Date</u> | <u>1 Student</u> | <u>2 or more Students</u> | <u>School Goal</u> |
|-------------------|-------------------|------------------|---------------------------|--------------------|
| Fall Fundraiser   | October           | \$100.00         | \$150.00                  | \$30,000           |
| Spring Fundraiser | March             | \$100.00         | \$150.00                  | \$40,000           |

If for some reason your student(s) do not participate in either fundraiser, you will receive a fundraising commitment reminder, which will have to be signed and returned to the Development Office. No final semester grade cards, student records or exam waivers will be released until financial commitment for that specific fundraiser is fulfilled.

Should you have any questions, we are here to help. Feel free to contact the Development Office at the school any time at 913-371-6901.

## Student Fundraising Commitment Contract

My student(s) and I will support and participate in the fundraising efforts of Bishop Ward High School for the 2010-2011 school year by asking others.

|                              |                           |       |
|------------------------------|---------------------------|-------|
| _____                        | _____                     | _____ |
| Student Printed Name         | Student Signature         | Date  |
| _____                        | _____                     | _____ |
| Student Printed Name         | Student Signature         | Date  |
| _____                        | _____                     | _____ |
| Student Printed Name         | Student Signature         | Date  |
| _____                        | _____                     | _____ |
| Parent/Guardian Printed Name | Parent/Guardian Signature | Date  |



# FORM FOR PHOTO RELEASE, PARENT EMAIL LIST, & CARPOOL LIST

## PHOTO RELEASE AGREEMENT

Throughout the school year there will be activities that will be great for photo opportunities. I consent to having my son/daughter's photograph taken during school hours or during any school related activity. I understand this photo can be used by the BWHS staff for marketing purposes (i.e., newspapers, yearbook, brochures, etc.)

Yes     No

\_\_\_\_\_  
Student Name(s)

\_\_\_\_\_  
Grade(s)

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

---

## PARENT EMAIL LIST (OPTIONAL)

Parents who join Bishop Ward's Parent Email List will receive updates on school happenings, event reminders and important announcements. Please provide your information below if you would like to join the parent email list.

\_\_\_\_\_  
Mother/Guardian Name

\_\_\_\_\_  
Email

\_\_\_\_\_  
Father/Guardian Name

\_\_\_\_\_  
Email

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## CARPOOL REQUEST (OPTIONAL)

Bishop Ward will help families find carpools through a list that will be distributed to families who call or return this form. To be added to the carpool list, please fill out and return the following information. We will send this list out in June.

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

I want my student to participate in a car pool to and from Bishop Ward High School:

- Parent will drive & accept paying riders
- Parent will take turns driving     a.m.     p.m.
- Will pay for ride if parent drives
- Student will drive & accept paying riders