



Covenant Tuition Services

Covenanting to Serve Christian Schools as unto the Lord
www.cts-tuition.com

Contact us:
CTS
PO Box 111
Fulton, IL 61252
Phone: 563-219-8873
Fax: 815-589-3869
info@cts-tuition.com

Covenant Tuition Services' Statement of Confidentiality regarding Tuition Assistance Application information for the 2020-2021 Academic Year

To process your application for Tuition Assistance at Sacred Heart School, each family must submit copies of their **2019 Federal** tax return, all W-2s from their employers, and any of the following schedules if the schedules were filed with the family's form 1040: 1, A, C, E, and / or F. If a family has not filed a tax return for 2019, please call Mary at 563-321-4210 to discuss what must be sent in place of the federal form 1040.

The purpose of all financial information submitted to Covenant Tuition Service (CTS) is solely for evaluating the ability of an individual family to pay tuition and their need for tuition assistance. This information will be kept secure and confidential with CTS. It will not be available to anyone outside of authorized staff at CTS and Sacred Heart School. CTS's report is an objective third-party assessment of ability to pay to help the school in planning financial aid decisions.

Changes to Payment by Credit/Debit Card

If you would like to pay by card instead of by Check, CTS will be able to send you an invoice from PayPal where you can make your payment online without needing to give out your card number to CTS.

To receive a PayPal invoice, please fill out the next lines:

Name of Parent on Application: _____

Names of Child/Children applying to Sacred Heart School: _____

Email to send invoice: _____

By signing below, I agree to pay the **\$27.00** invoice from CTS to pay for processing this application. I also understand that unpaid invoices will hold up the processing of this application.

Signature: _____

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www.cts-tuition.com/saceffil/

Tuition Assistance for the
2020-2021 Academic School Year

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Sacred Heart School

407 S Henrietta Street • Effingham, IL 62401 • Phone: 217-342-4060 • www.sheff.org

Due Date: April 13th, 2020

Parent/Guardian Name: _____

Phone: _____

Address: _____

Email: _____

City, State & Zip: _____

Names & Grades of children applying: _____

Number of persons in household: _____

Number of parents in household: _____

Household Income

1. 2019 Father's W-2 income: _____

(W-2 box 3; Do not include self-employment)

2. 2019 Mother's W-2 income: _____

(W-2 box 3; Do not include self-employment)

3. 2019 Social Security Benefits: _____

(Include total for all household recipients)

4. 2019 Child Support Received: _____

(Include total for all household recipients)

5. 2019 Military/Clergy Housing

Allowance: _____

6. 2019 Non-taxable income: _____

(W-2 box 12; ADC; General Assistance; Food Stamps; others)

Household Assets

12. Household Adults' Cash on Hand: _____

(Total in all: Cash, Checking, and savings)

13. Value of Home _____

14. Value owed on Home: _____

15. Value of stocks, bonds, investments: _____

(Exclude retirement and pension accounts)

16. Value of other assets owned: _____

Circle type: real estate business farm

17. Amount owed on assets in #16: _____

18. Automobiles – year, make, and model:

Household Deductions

7. 2019 Medical/Dental expenses: _____

(Expenses not covered by insurance and premiums paid outside of an employer's plan. You must provide a Schedule A or an itemized list of expense.)

8. 2019 Child Support Paid: _____

(Total paid for children not in household)

9. 2019-2020 K-12 Tuition Paid: _____

(Total after all amounts paid on your behalf by others, grants, and gifts are subtracted. Don't include college tuition here, See #19)

10. 2019 Church contributions: _____

(Include Schedule A or letter from the church)

11. 2019 Childcare expenses: _____

(Include Form 2441 or bill from provider)

Other Information

19. 2019 Household college tuition paid: _____

(Include Form 8863 or bill from college showing amount paid)

20. List weekly unemployment amount for all unemployed household parents: _____

21. How much can you pay for your children's education at this school? _____

Do not enter \$0 or leave blank. Please enter a reasonable estimate. Be sure to indicate if you are listing a payment plan, i.e. monthly, etc.

22. Additional sheets can be used to explain special circumstances if necessary for processing, such as medical hardships, changes in employment that will cause increase or decrease in income, etc.

Complete form and send with the following **required** items:

1. Payment for processing (choose only one option)
 - a. Check/Money Order for \$25. **Do not mail cash**
 - b. PayPal invoice for \$27
2. Copy of **2019 Federal Tax Return**
3. Copy of Schedules and Forms filed with the tax return; Required items are Schedules: 1, A, C, E, F and Forms: 2441 and 8863
4. Copy of **2019 W-2(s)** and all other supporting documents listed for #3- #22

Applications can be sent via one of three ways:

1. Mail: Covenant Tuition Services
PO Box 111
Fulton, IL 61252
2. Email: info@cts-tuition.com
3. Fax: 815-589-3869