



Angel Scholarship Tuition Assistance Application 2024-25 School Year

We ask that every family complete this application regardless of whether or not tuition assistance will be needed for the upcoming school year.

I acknowledge that I am applying for tuition assistance from the Angel Scholarship Fund. The source of this financial assistance is contributions that have been designated to my school that are to be applied toward my child's/children's tuition balance. I understand that completing this application does not guarantee a tuition assistance award as funds are limited and awards are based on family financial need. I certify that all financial information provided for Angel Scholarship Tuition Assistance is true and correct.

School Name _____

Child Name(s) _____

Parent Name(s) _____

Parent Signature(s) _____

Date _____