

## SUPPORTED STUDENT FORM

A parent or guardian must complete this form and have it signed by the Pastor, and **returned to the school no later than March 1, 2010**. The timely completion of this form will enable the student(s) to receive the supported tuition rate for the next school year.

**NOTE:** The parish seal must be on this form.

**School:** \_\_\_\_\_ **City/Town:** \_\_\_\_\_

**Parish:** \_\_\_\_\_ **City/Town:** \_\_\_\_\_

**Name of Parent/  
Guardian:** \_\_\_\_\_

**Parent/Guardian  
Address:** \_\_\_\_\_

**Parent/Guardian  
Phone Number:** \_\_\_\_\_ (Home) \_\_\_\_\_ (Work)

**Student(s):** \_\_\_\_\_ **Grade:** \_\_\_\_\_

\_\_\_\_\_ **Grade:** \_\_\_\_\_

\_\_\_\_\_ **Grade:** \_\_\_\_\_

\_\_\_\_\_ **Grade:** \_\_\_\_\_

**Parent/Guardian  
Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This is to confirm that the above signed meet all three of the minimal Diocesan Support Criteria which include:**

- 1. Registration in a parish or mission;**
  - 2. Contributor of record in a parish or mission;**
  - 3. Active participation in the life of a parish or mission.**
- (As stated in the plan for "Diocesan Support of Catholic Schools in New Hampshire.")

**Pastor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please include the parish seal on this form.

(Please make a copy of this form for your files and return the original to the school by March 1, 2010.)