

FENWICK HIGH SCHOOL
CONFIRMATION OF ELIGIBILITY
FOR PUBLIC SERVICE/ ARCHDIOCESAN
TUITION DISCOUNT
2012/2013

Student Name(s) _____ Year(s) of Graduation _____

Name of parent , responsible for tuition who will be a full-time Archdiocesan, Police or Fire Department or Active Military employee for the school year 2012/2013

_____ Job Title _____

	<u>Per Week*</u>	<u>School Year</u> <u>Only</u>	<u>All Year</u>
Est. Hours Worked 2012/2013	_____	<input type="checkbox"/>	<input type="checkbox"/>
Expected Hours 2012/2013	_____	<input type="checkbox"/>	<input type="checkbox"/>

*In order to qualify a minimum of 30 hours a week during the full school year is required. Please attach a copy of your **2011 W-2** or explain if not available.

NAME AND ADDRESS OF EMPLOYER:

I hereby apply for Fenwick’s Public Service/Archdiocesan Employee’s Discount. I agree to advise Fenwick if I stop working for the above Employer.

 DATE

 SIGNATURE

* * * * *

CERTIFICATION OF EMPLOYER:

I hereby certify that _____ will be an employee
 of _____ for the school year 2012/2013 as indicated
 above.

 DATE

 NAME AND TITLE