KREMER FOUNDATION

ANNUIT COEPTIS
"HE HAS SMILED ON OUR UNDERTAKINGS"

1100 5th Avenue South • Suite 411 • Naples, FL 34102
239.261.2367 ~ Fax 239.261.1494 kremerfoundation@embarqmail.com

Catholic Elementary School Profile Application 2020-2021 School Year
For Non-Participating Schools

SCHOOL INFORMATION

School Name: _____

Address: _____

City, State & Zip: _____

Phone (with area code): _____ Fax #_____

Principal's School E-mail Address: _____

Arch/Diocese: _____

Grades Offered: _____ Age of School Facility:_____

Number of Teachers from Religious Communities _____ Number of Lay Teachers:_____

School's listing in P.J. Kenedy Official Catholic Directory: Year _____ Page #_____

(A School must be listed in the current edition in order to qualify)

STATISTICS (FOR GRADES K-8 ONLY)

Number of Students Per School Year:

2019 - 2020	2018 - 2019	2017 - 2018
_____	_____	_____

Ethnic Diversity:

Percentage of Caucasians: _____%

Percentage of Hispanics: _____%

Percentage of African-Americans: _____%

Percentage of Others: _____%

Percentage of Economic Range of Families of Students:

Lower Economic (qualify for reduced priced lunch)	Middle Income	Economically Comfortable
_____%	_____%	_____%

BUDGET (FOR GRADES K-8 ONLY)

Is the Budget for the 2019-2020 School Year Balanced? _____ (Yes or No)

Total School Budget for the 2019-2020 School Year: $_____

Cost per Pupil for the 2019-2020 School Year: $_____

Percentage of School Budget Supported by:

Tuition_____%

Parish_____%

Other_____%

Is Your School Tuition-Free? _____ (Yes or No) (Tuition-Free Schools are NOT eligible for our Tuition Grant Program)

Yearly Tuition 2019-2020 School Year: Parishioners: $_____ Non-Parishioners: $_____
(for one child)

Does your School have a Tuition Assistance Program of its own? _____ (Yes or No)

Is your School the recipient of Tuition Assistance from your Arch/Diocese or other organizations?_____ (yes or no)

If yes, from where?_____ Total Amount? _____

_____The head of the applicant School must initial indicating his/her confirmation that all information provided to the Foundation is accurate and current.

Signature of Head of School - Title _____ Date _____

Printed Name of Head of School _____ Name of Grant Contact - Title _____

2.21.20 E-mail Address of Grant Contact _____