

# Sr. Thea Bowman Catholic School

*"Where Students Excel and Prophets are Formed"*



Shae Goodman- Robinson  
Principal

## 2018-2019 ADOPT-A-STUDENT SCHOLARSHIP APPLICATION FORM

**Note: A donation to the Adopt-A-Student Scholarship Program is tax deductible.**

I, \_\_\_\_\_, (Adopt-A-Student Scholarship Donor),  
Print Name

understand that I am completing this form because I would like to make a donation to the 2018-2019 Sister Thea Bowman Catholic School's Adopt-A-Student Scholarship Program.

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

-----  
2018-2019 Elementary Tuition Fee: \$4050

**I would like to donate the following:** (Please check one or more of the following)

- \_\_\_\_\_ \$4050 Full Adopt-A-Student Tuition Assistance  
• [One payment of \$4050]
- \_\_\_\_\_ \$4050 Full Adopt-A-Student Tuition Assistance  
• [Ten (10) monthly payments of \$405]
- \_\_\_\_\_ \$2025 Half Adopt-A-Student Tuition Assistance  
• [One payment of \$2025]
- \_\_\_\_\_ \$2025 Half Adopt-A-Student Tuition Assistance  
• [Ten (10) monthly payments of \$202.50]
- \_\_\_\_\_ Other General Donation \$ \_\_\_\_\_  
• [One time Payment] \$ \_\_\_\_\_  
• [Monthly Payments] \$ \_\_\_\_\_

-----  
**MAKE CHECKS PAYABLE TO: SISTER THEA BOWMAN CATHOLIC SCHOOL**

Donor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Thank you for your donation! Questions: Please call (601) 352-5441**

**OFFICE USE ONLY**

Donation Completed/Paid in Full: \_\_\_\_\_ Date: \_\_\_\_\_