

**GOIZUETA FOUNDATION ENDOWMENT  
FOR HISPANIC AND LATINO STUDENTS  
2018-2019**

Please complete the following: (PLEASE PRINT)

STUDENT NAME/S \_\_\_\_\_ GRADE '18-'19 \_\_\_\_\_

\_\_\_\_\_ GRADE '18-'19 \_\_\_\_\_

\_\_\_\_\_ GRADE '18-'19 \_\_\_\_\_

RESIDENT PARENT/GUARDIAN \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ HOME PHONE \_\_\_\_\_

MOTHER CELL \_\_\_\_\_

FATHER CELL \_\_\_\_\_

What school does your child currently attend? \_\_\_\_\_

What member of your family was first to come to the United States? \_\_\_\_\_

From what country is your Hispanic heritage? \_\_\_\_\_

How did you learn about The Goizueta Foundation tuition assistance? \_\_\_\_\_

\_\_\_\_\_

Home Parish \_\_\_\_\_

Are you active in your Parish?        YES        NO    Explain: \_\_\_\_\_

Are you active in your School?        YES        NO    Explain: \_\_\_\_\_

Have you applied for Archdiocesan Tuition Assistance?        YES        NO

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date