JAEGER FOUNDATION MOUNT CARMEL ACADEMY SCHOLARSHIP APPLICATION

- **Eligible Employees**
  - **Employee is currently employed by MCC for 10 continuous years or more as of 12/31/09**

- **Eligible Child**
  - **Lineal descendant of the associate (parent or grandparent) or legally adopted**
  - **Under the age of 19 (unless handicapped)**
  - **Attending 8TH grade thru high school at Mount Carmel Academy in New Orleans, LA**
  - **Is not receiving scholarship or other financial assistance outside of MCC and/or Jaeger Foundation benefits (excluding loans)**
  - **Has not been provided tuition benefits from MCC or the Jaeger Foundation and withdrew from school during the semester or academic year benefited**

- **Determination of Benefits**
  - **Years of continuous service with MCC**
  - **Number of participating students**
  - **Funds available in the Endowment**

Employee Information		
Name:		
Telephone:		
Home Address:		
City, State, Zip:		
# of Children:	# of School Age Children:	Handicap Children: YES NO
Marital Status: Married Single Divorced		
Employment Date with MCC:	Position with MCC:	
Circle Adjusted Gross Income of Associate & Spouse Jointly: $30,000-$60,000 $60,000-$90,000 Over $90,000		

Student-Applicant Information		
Name of Qualifying Child:		
Is the child currently a student at Mount Carmel Academy? YES NO		
Current Grade Attending @ MCA:	Grade Applying For @ MCA:	Cost of Tuition: $
Is the student applying for admittance to MCA for the first time? YES NO If yes, what school is the child currently attending? _____		
Does the child hold a job during the school year? YES NO Employer: # of Hours Per Week		
Does the child perform community service? YES NO Name of organization: _____ Services performed: _____ Hours of service per month:		
Birthday of Child:	Current Age of Child:	
Has the child held a leadership position in the last year? YES NO Name of organization: _____ Position held: Date(s) Held:		
Does the child receive scholarship monies?: YES NO If yes, explain what amt. & amt. paid for tuition and other expenses: _____ _____ Does the child receive money from MCC Tuition Benefits Program? YES NO		
Briefly describe the child's highlights of the current year, special information about the associate, special needs of the child or associate or any other information that will benefit the Foundation. Use the back of this form if necessary: _____ _____ _____ _____		