

Espirito Santo Parochial School

143 Everett Street, Fall River, MA 02723 Rev. Maurice O. Gauvin, Pastor Tel: (508) 672-2229 Fax: (508) 672-7724 Mr. Andrew J. Raposo, Principal www.espiritosantoschool.org www.facebook.com/EspiritoSantoSchool

November 7th, 2023

Dear Espirito Santo School families,

In continuation of the Diocesan Task-Force initiative program, our school will be reapplying for E-Rate funding, which allows the school to receive funding toward the purchase and installation of new equipment, as well as reimbursement for high-speed internet access. In order to apply for E-Rate funding, the school must collect data from all families, no matter where you live.

On the reverse side of this letter, you will find the school survey. Please be assured that this information will be kept private. Only averages for the entire school will be submitted with the grant application. Also, these applications will only be viewed by the Principal.

In order to continue to move our school forward, it is necessary for every family to fill out this form. Please understand that these are your federal tax dollars at work, and we want to maximize the return. It will benefit your students, and students to come in the future.

I would ask that this form be completed by **Monday**, **November 13**th, **2023** in order for the school to receive the maximum funding. If you have any questions, you may contact me in the school office at 508-672-2229.

Sincerely,

Mr. Andrew J. Raposo

Principal

School Survey

We are going to apply for an E-rate grant that will allow us to purchase and use technology to better teach our students the skills they will need to prosper. The funds that we will receive from this grant depend on the financial resources of our students' households. To apply for this valuable grant we need your help in completing this brief survey.

Please be assured that this information will be kept private. Only averages for the entire school will be submitted with the grant application.

School Name: Espirito Santo School City/Town: Fall River
Family Name:Student Name[s]:
Address of family: Grade level of each child (list grade of each child attending our
school):Size of family (number of related or unrelated people living in your household):
If you participate in one of the following assistance programs please check the appropriate box.
 □ Temporary Assistance for Needy Families (TANF) □ Need-based tuition assistance programs that rely on family income data comparable to National School Lunch Program □ Medicaid □ Food stamps □ Supplementary Security Income □ Federal public housing assistance (Section 8) □ Low Income Home Energy Assistance Program
To make this process as easy as possible you may provide your income on a weekly, every two week, twice a month, or monthly basis, whichever is easiest to calculate.
Total family income: ☐ per week; ☐ every two weeks; ☐ twice a month; ☐ annually
Please indicate the types of income below (the total of these amounts should match the "Total family income" entered above.
1. Monthly welfare payments, child support, alimony \$