



**ST. JOSEPH EDUCATION FOUNDATION**  
Lakeland, FL

## FACTS Grant and Aid Release of Information

I, \_\_\_\_\_, hereby authorize (*Resurrection Catholic School, St. Anthony Catholic School, or Santa Fe Catholic High School*) to release a copy of my FACTS Grant and Aid application and all other related information for the purpose of determining scholarship eligibility, to the St. Joseph Educational Foundation.

I understand this information is private and confidential and will not be shared with anyone other than the St. Joseph Educational Foundation and its members who will review such in an effort to determine eligibility for a scholarship for my child(ren) at one of the above mentioned Catholic schools.

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date