



Dear TOPS Family,

Congratulations! Your child has been awarded the St. Pope John Paul II Tuition Opportunity Partnership Scholarship. With this award, comes responsibilities on the part of the student and family. You commit to these responsibilities upon signing the agreement. Please submit this form quarterly. (Additional copies will be emailed to you.)

NAME _____ QUARTER (circle nine weeks) 1st 2nd 3rd 4th

CHURCH _____ Please provide a contact from the church (secretary/pastor):

Name _____ and number/email _____

Church Service Attendance _____ WEEKLY _____ MONTHLY _____ OCCASIONALLY _____ NEVER

Church 'Activities' Attendance _____ YES _____ NO

CHURCH Donations of time, talent, and treasures:

List activity (such as festivals, prayer groups, etc.)

_____	_____ TIME/TALENT (in hours)	TREASURE - _____yes _____ no
_____	_____ TIME/TALENT (in hours)	TREASURE - _____yes _____ no
_____	_____ TIME/TALENT (in hours)	TREASURE - _____yes _____ no
_____	_____ TIME/TALENT (in hours)	TREASURE - _____yes _____ no
_____	_____ TIME/TALENT (in hours)	TREASURE - _____yes _____ no

SCHOOL Donations of time, talent, and treasures:

List activity (such as canned food drive, ticket sales, marathon, etc.)

_____	_____ TIME/TALENT (in hours)	TREASURE - _____yes _____ no
_____	_____ TIME/TALENT (in hours)	TREASURE - _____yes _____ no
_____	_____ TIME/TALENT (in hours)	TREASURE - _____yes _____ no
_____	_____ TIME/TALENT (in hours)	TREASURE - _____yes _____ no
_____	_____ TIME/TALENT (in hours)	TREASURE - _____yes _____ no

My child has been a part of these activities whenever applicable. _____ yes _____ no

My child has maintained an A/B average this quarter. _____ yes _____ no

My child has **not** received any discipline referrals. (behavior, dress code, etc.) _____ correct _____ they have

My child's attendance is good. (minimal absences/days tardy) _____ correct _____ no