



NOTRE DAME PREPARATORY HIGH SCHOOL  
9701 E. Bell Road, Scottsdale, AZ 85260  
(480) 634-8200

**Catholic Parish Verification Form**  
**School Year 2020-21**

Name of Parents: \_\_\_\_\_  
*Last Father Mother*

Name of Student(s): \_\_\_\_\_  
*Last First Middle*

\_\_\_\_\_  
*Last First Middle*

Home Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Father's Work: \_\_\_\_\_ Mother's Work: \_\_\_\_\_

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**Parent/Guardian:**

As registered, active, and participating members of \_\_\_\_\_ Parish  
in the Diocese of Phoenix, we request the Catholic tuition discount rate for our student(s) who will attend *Notre Dame Preparatory High School* for the 2020-21 school year.

Name of Student(s): \_\_\_\_\_

\_\_\_\_\_  
*Parent's/Guardian's Signature Date*

*The family is responsible for returning this form to Notre Dame Preparatory High School on or before May 1, 2020, to be eligible for the reduced tuition rate.*

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**Verification from Parish:**

This family is a registered, active, and participating member of our parish.

\_\_\_\_\_  
*Pastor's Signature/Date Parish Stamp*

*Please return this signed form to the requesting family for submission to Notre Dame Prep.*