



STEUBENVILLE CATHOLIC SCHOOLS EST. 1890

Crusader Family Grant Application

Family Name: _____ Date: _____

Address: _____

Child: _____ Grade: _____ HOPE Student?: Y /N _____

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Child: _____ Grade: _____ HOPE Student?: Y /N _____

Child: _____ Grade: _____ HOPE Student?: Y /N _____

Have you applied for the following: Indicate Y, N or N/A

EdChoice _____

Christ the Teacher _____

Immaculate Heart _____

School Financial Aid _____

Please circle your 2025 income level based on household adjusted gross income and household size:

Check mark the "Above 400%" based on Household Size if your income is above 400%

2026 Federal Poverty Levels (FPL - Dollars Per Year)

Household Size	100% FPL	138% FPL	250% FPL	400% FPL	ABOVE 400% FPL
1	\$15,060	\$20,794	\$37,650	\$60,240	
2	\$20,440	\$28,207	\$51,100	\$81,760	
3	\$25,820	\$35,620	\$64,550	\$103,280	
4	\$31,200	\$43,033	\$78,000	\$124,800	
5	\$36,580	\$50,446	\$91,450	\$146,320	
6	\$41,960	\$57,859	\$104,900	\$167,840	