Carlow University offers a tuition discount to students who are full-time teachers or principals at schools located in the Diocese of Pittsburgh. This Diocesan Discount provides a fifty-percent reduction of tuition each semester. The discount is not applicable to doctorate level programs and only one Carlow University degree may be earned under this reduced tuition policy. This form must be submitted to the Financial Aid Office prior to the semester for which you are requesting the discount and a new form must be submitted each semester. The discount will not be applied retroactively. Your employment verification (below) must be completed by the school principal or appropriate school administrator. Mail, fax or email your completed form to the Financial Aid Office prior to the start of the semester.

Part One – Student Information

Name ___________________________________________ Student ID_________

Class Level    □ Undergraduate    □ Graduate

Major or Program_________________________________________________________________________

Number of credits planned_____  

Applicable Semester/Year    □ Fall    □ Spring    □ Summer    Year 20_____

Name of school where you are a teacher or principal _________________________________________

School Address_________________________________________________________________________

School is located in the Diocese of Pittsburgh    □ Yes    □ No  Employment Status □ Full-Time Teacher □ Principal

Student Certification
I confirm that I am a full-time teacher or principal at the school indicated above. I agree to notify the Financial Aid Office at Carlow University if my employment status changes. I understand that this form is applicable to one semester, also indicated above, and that a new form must be submitted prior to each semester in which a discount is requested.

Signature_________________________________________ Date_______________

Part Two – Employment Verification

I verify that the student named above is a full-time teacher or principal at a school located in the Diocese of Pittsburgh. I agree to notify the Financial Aid Office at Carlow University if the student’s employment status changes.

Printed Name__________________________________ Title______________________

School__________________________________________

Phone_________________________________________ Email_______________________

Signature_______________________________________ Date_______________

Return completed form to the Financial Aid Office at Carlow University
3333 Fifth Avenue
Pittsburgh, PA 15213
Fax 412-578-6401
finaid@carlow.edu

Office use only:
Tuition__________  
Award__________  
Date__________