DEADLINE: January 30, 2026

PIUS XI
CATHOLIC HIGH SCHOOL

SCHOOL YEAR: 2026-2027
ARCHDIOCESE OF MILWAUKEE
EMPLOYEE TUITION REDUCTION APPLICATION

STUDENT NAME: _____ GRAD YR: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

NAME OF ARCHDIOCESE EMPLOYEE: _____

RELATIONSHIP TO STUDENT(S): (circle one) Mother Father Legal Guardian

HOME PHONE: _____ WORK PHONE: _____

PARISH OR SCHOOL WHERE EMPLOYED: _____

PARISH/SCHOOL ADDRESS: _____
(Street) (City) (State) (Zip)

JOB TITLE/POSITION_____DATE OF HIRE*:_____

_____Full-time employee

_____Part-time Employee How many hours per week are you working? _____

***Must have been employed a minimum of one full year to be eligible for this tuition reduction program.**

EMPLOYER'S AUTHORIZATION

I hereby acknowledge that all job-related information on this application is accurate, and that

_____ is an employee of_____
(Parish/School Name)

and is part of the Archdiocese of Milwaukee.

Signed: _____ Date: _____

Title: _____

Return Form by scan/email to: admissions@piusxi.org
or mail to:
Pius XI Catholic High School
Attn: Office of Admissions
135 N. 76th St.
Milwaukee, WI 53213