



SUPPLEMENTAL FINANCIAL ASSISTANT APPLICATION SCHOOL YEAR 2026-2027

We will make every effort to distribute Financial Assistance budget as equitably and fairly as possible. This requires the cooperation of the applicants in supplying the School with the information needed.

***Applying does not guarantee tuition assistance**

***Between 10% - 30% tuition assistance is given out**

***Applications have a deadline each year of Dec 15th.**

***Late applications will only be reviewed if funds remain and after all timely applications have been processed.**

***Applications will be reviewed and finalized by February 15th.**

All information submitted is handled in strictest confidence.

Student's Name: _____ Current Classroom: _____
First Middle Last

Parent 1: _____
Parent(s)/Guardian(s) Financially Responsible for Student

Address: _____
Street City Zip

Telephone: Home _____ Work _____

Email _____

Parent 2: _____

Address: _____
Street City Zip

Telephone: Home _____ Work _____

Email _____

The information reported on this form is complete and correct to the best of my/our knowledge.

Form completed by: _____

Signature(s): _____ Date Submitted: _____

Print Name(s): _____

DOCUMENTATION

1. Checklist of required documentation to submit. Please send copies directly to the school office:

- A. Most current year of Federal Income Tax Return (form 1040) with all accompanying Schedules
- B. All W-2 forms
- C. All 1099 forms
- D. If you are Self Employed you must include the following if appropriate: Schedule C of form 1040 Schedule 1120 if you are incorporated Schedule 1120S if you are a Subchapter S Corporation Form K-1 if you are a shareholder or partner Prior year's Balance Sheet for your business
- E. If you are divorced or legally separated please submit the appropriate section of your most recent decree, which indicates:
 - Child support
 - Custody arrangements
 - Spousal support
 - Arrangement for educational expenses
- F. The last two pay-stubs for each parent

It is very helpful to the Committee to understand your obligations. Please submit a list of your monthly income and expenses. If you have irregular income, such as commissions, allocate 1/12 of your annual income to this monthly budget. If you have irregular expenses, such as insurance, property tax payments, or vacation expenses, please allocate 1/12 of the total to this monthly budget. Please use our form on page three.

2. Family MONTHLY Budget

It is important for you to have a clear picture of your monthly expenses along with the financial statement you submitted to the School and Student Service for Financial Aid. Please complete the following monthly budget:

Monthly Income:

Parent #1	
Salary/Net Wages	_____
	(after taxes)
Parent #2	
Salary/Net Wages	_____
	(after taxes)
Business/Professional	_____
Dividends/Interest	_____
Rentals (gross)	_____
Spousal Support	_____
Child Support	_____
Disability	_____
Unemployment	_____
Social Security	_____
Other	_____
Total Current	_____
Monthly Net Income	_____
	(after taxes)

Monthly Expenses:

Mortgage(s)	_____
Property Taxes	_____
Home Insurance	_____
Home Repair & Maintenance	_____
Household Supplies	_____
Utilities	_____
Telephones	_____
Rent	_____
Renter's Insurance	_____
Automobiles:	
Make_____Year_____Lease or owned?	
Make_____Year_____Lease or Owned	
Total Auto Payment(s)	_____
Auto Insurance	_____
Auto Maintenance & Repairs	_____
Medical/Dental Insurance	_____
Medical & Dental Expenses	_____
Life Insurance	_____
Groceries	_____
Entertainment	_____
Clothing	_____
Vacations	_____
Tuition (current)	_____
Tuition – Other children	_____
Child Care & Activities (from pg.5)	_____
Incidentals	_____
Credit Card Payments	_____
Other: _____	_____
Other: _____	_____
Total Current	
Monthly Expenses	\$_____

DO NOT LEAVE BLANK

(Yearly Figure)

Resources available to cover tuition for the school year:

From parent(s)

\$ _____

From relatives and friends

\$ _____

From student assets

\$ _____

From other sources

\$ _____

Total amount available to pay for tuition for the school year.

\$ _____ (not monthly amount)

3. Home Refinancing:

Have you refinanced your home in the past 2 years:

How many times:

Do you have an equity line of credit:

If so, what was the total line of credit: _____

What is the current balance: _____

What is your home equity: \$ _____
as of (date): _____

4. Credit Card Debt

Please explain, in detail, why you incurred this credit card debt:

5. Children's Activities, Care & Education

Please complete the following if your child (or children) are in day care or participate in other programs. Indicate your MONTHLY expenses for these activities:

- Number of children in family _____
- Child's name, grade, and school currently enrolled. Please indicate if you are receiving any financial assistance for each child.

Child #1 _____

Child #2 _____

Child #3 _____

Total Tuition paid for all children in 2025-2026 \$ _____

- Day Care Monthly Cost \$ _____
- After School Care/Program Monthly Cost \$ _____
- Summer School (cost ÷ 12 months = a Monthly Cost of) \$ _____
- Camp (cost ÷ 12 months = a Monthly Cost of) \$ _____
- Club Sports Activities Monthly Cost \$ _____
- Lessons: Type Monthly Cost \$ _____
- Tutoring: For Monthly Cost \$ _____
- Other: _____

Total Monthly Costs \$ _____

6. Divorced or Separated Families

If parents are separated or divorced, please describe the financial and custody arrangements for the education of your child:

7. Change in Family's Circumstances

Fully describe any recent changes in your family's situation or unusual circumstances that affect your ability to pay tuition:

Is this an isolated or continuing situation/need?

8. Self-Employment

Are you self-employed?

Yes

No

If you checked yes, please answer the following questions:

- What percentage of the business do you own? _____
- Do you operate your business out of your home? _____
- Do any of your family members work in the business? _____
(Please specify) _____

Self-employed individuals must also attach copies of the following forms, as appropriate:

- _____ Schedule C of Form 1040 or Profit and Loss Statement
- _____ Schedule 1120 form if your company is incorporated
- _____ Schedule 1120Sh if your company is a Subchapter S Corporation
- _____ Form K-1 if you are a shareholder or partner (please note: if the partnership has not filed its 2025 K-1 as of this application's deadline date, please submit the 2024 K-1 and provide an estimate of the 2025 K-1)

9. Are you the beneficiary of a trust: _____ **Amount:** _____

Have you received an inheritance: _____ **Amount:** _____

10. Do you have any other resources available to your family to help pay the cost of private school tuition; i.e. extended family members. Please give details: _____

11. Other Comments

Please provide any other comments or other information, which would be pertinent to your application: You may attach an additional sheet if needed. ____

Return this completed form to the school office.