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Student Tuition Assistance Financial Grant Form

(One form per family.)

2011/12 Tuition Assistance Application Deadline

Wednesday, April 27, 2011

NO EXCEPTIONS

Please note:

A copy of your most recent Federal Income Tax Return must accompany this application. All families applying for a grant must participate in the *Scrip Program*.

Return to either school office in the enclosed envelope labeled **Confidential**.

Please **do not** put your family name on the outside of the envelope.

Port Catholic Financial Grant Application

INSTRUCTIONS

GENERAL: This form should be filled out by the parent(s) of the child or children attending Port Catholic. If the parents are divorced or separated, then the parent having financial responsibility of the children should fill out the form.

When entering financial data, omit cents. For example, enter \$3495.86 as \$3495.

Use data from your last year's income tax return, or if that is not available, use the previous year's return.

Answer all questions. If the information requested is not applicable then enter none, or N/A. DO NOT leave items blank.

A-B. Parent Financially Responsible for Children(s) Education

Answer questions 1 through 8 for both the male and female parent, stepparent or guardian. Do not leave any questions blank. If natural parents are divorced or separated, be sure and answer all questions in Section 1.

C. Family Size

ITEM 9: Enter family size at home. Do not include children who have moved out of the home. Include only family members dependent on and residing with parents listed in Item A.

D. Parents' Marital Status

ITEM 10: Be sure to check appropriate box indicating parents marital status. If parents are divorced or separated, complete section 1.

E. Parents' Income Information

Report actual amounts for the previous year and estimated amounts for this past year's on lines 13-17.

ITEM 11: Check me items that fit the status

ITEM 12: Enter the total number of exemptions you claimed (or will claim) on your last year's Federal Income Tax Return.

ITEM 13 - 17: Enter previous year's totals and estimated this year's amount.

ITEM 18: Enter the total ADJUSTED GROSS INCOME as reported on IRS 1040,1040A, or 1040EZ.

ITEM 19: If family receives any income from child support, welfare (AFDC), Social Security and/or any other nontaxable source, report amount here. Enter amount per month.

F. Parents' Assets Information

ITEM 20: Enter the present combined amounts of parents cash on hand, checking accounts, and savings accounts. Do not include IRA or Keough accounts.

ITEM 21: Determine the present value of the family home and enter it here.

ITEM 22: If the family owns other real estate and/or investments, enter amounts on appropriate lines.

ITEM 23: If the family owns a business or farm enter in appropriate columns the current value and amount owed on it. If parents are not the sole owners, enter only the amount of their share of the total farm or business current market value.

G. Liabilities

ITEM 24: Enter the balance of any first or second mortgages.

ITEM 25: Enter the balance of any car loans.

ITEM 26: Enter the balance of any charge accounts.

ITEM 27: Enter the total of any medical and dental expenses not paid by insurance.

H. Student Information

Use the section to specify the number of your children attending day care, private elementary, high schools, college and trade schools.

I. Unusual Circumstances

Use the section so explain any unusual circumstances regarding your family situation.

Student Financial Grant Form

A. Financially Responsible Parent

Check one.

- Father
 Mother
 Stepfather
 Stepmother
 Other (please explain in Section I)

1. Last Name _____ First Name _____ MI _____

2. Social Security No. _____ 3. Date of Birth _____

4. Street Address _____

5. City _____ State _____ Zip Code _____

6. Home Phone _____ Work/Cell Phone _____

7. Occupation/Title _____

8. Employed by _____ How Long? _____

B. Other Parent

Check one.

- Father
 Mother
 Stepfather
 Stepmother
 Other (please explain in Section I)

1. Last Name _____ First Name _____ MI _____

2. Social Security No. _____ 3. Date of Birth _____

4. Street Address _____

5. City _____ State _____ Zip Code _____

6. Home Phone _____ Work/Cell Phone _____

7. Occupation/Title _____

8. Employed by _____ How Long? _____

C. Family Size

9. Number of family members financially dependent on parent listed in Section A who will reside in the household for the current school year.

_____ Number of Parents _____ Number of Children

D. Responsible Parent's Current Marital Status

(Please check one.)

10. A. Single B. Married C. Widowed D. Divorced E. Remarried F. Separated
 G. Other _____

E. Parent's Income & Deduction

Report actual amounts for last year and estimated amounts for the current year on lines 13 – 19.

11. The following information is from:

- A. a completed tax return
 B. estimated tax return
 C. I/we did not file a tax return

12. Total number of exemptions claimed this year _____

	Actual	Estimated
13. Father	\$ _____	\$ _____
14. Mother	\$ _____	\$ _____
15. Other taxable income from interest, dividend, employment	\$ _____	\$ _____
16. Net income from business, farm, rentals	\$ _____	\$ _____
17. Alimony/Child support	\$ _____	\$ _____
18. Total adjusted gross income (IRS 1040)	\$ _____	\$ _____
19. Welfare (AFDC), Social Security or any other non-taxable source	\$ _____	\$ _____ OVER

F. Assets

20. Cash and Savings \$ _____
 21. Real Estate: Home (market value) \$ _____
 22. Other real estate or investments \$ _____
 23. Business or farm (your share only) \$ _____

G. Liabilities

24. Mortgage Holder _____ (Balance) \$ _____
 Holder _____ (Balance) \$ _____
 25. Auto Loan Holder _____ (Balance) \$ _____
 Holder _____ (Balance) \$ _____
 26. Charge Accounts:
 Name _____ (Balance) \$ _____
 Name _____ (Balance) \$ _____
 Name _____ (Balance) \$ _____
 Name _____ (Balance) \$ _____
 27. Other Debts:
 Type _____ (Balance) \$ _____
 Type _____ (Balance) \$ _____
 Type _____ (Balance) \$ _____
 Type _____ (Balance) \$ _____
Total Liabilities \$ _____

H. Student Information

List only the number of children who will be attending tuition charging school, pre-schools or day care centers next fall and cost of tuition.

	# of Children	Total Cost for All
Day Care	_____	_____
Elementary Schools	_____	_____
High Schools	_____	_____
College	_____	_____

I. Student Information

Please explain any unusual circumstances here: _____

J. Estimated Monthly Expenses

28. Mortgage/Rent \$ _____
 29. Utilities \$ _____
 30. Food \$ _____
 31. Medical/Dental \$ _____
 32. Insurance \$ _____
 33. Other _____ \$ _____
 34. Amount Available for Port Catholic Tuition \$ _____