

**Saint Joseph Notre Dame High School  
Tuition Assistance Application  
2009-10**

All applicants for tuition assistance must fill out this form along with submitting a PSAS application. This application must be submitted to SJND no later than **February 6, 2009** (new students) or February 13 (returning students) along with the following documents:

- 2008 Federal Income Tax return(s) (with all supporting schedules)
- 2008 W-2; Forms 1099 (all forms including Form 1099-B); Form K-1s (2007 federal tax return(s) may be submitted if 2008 federal tax return(s) are not complete, but your 2008 federal tax return(s) must be submitted in order for the application to be finalized and student registration to be completed).

STUDENT DATA

List all SJND students who are applying for tuition assistance

<i>Last name</i>	<i>First name</i>	<i>2009-10 grade in school (circle)</i>			
_____	_____	9	10	11	12
_____	_____	9	10	11	12
_____	_____	9	10	11	12

FAMILY DATA

Father/Stepfather/Guardian 1 information

*Last name* \_\_\_\_\_ *First name* \_\_\_\_\_

Mother/Stepmother/Guardian 2 information

*Last name* \_\_\_\_\_ *First name* \_\_\_\_\_

CURRENT INCOME INFORMATION

Monthly Income from all sources (check source and indicate amount):

Father \_\_\_ Stepfather \_\_\_ Male Guardian \_\_\_ gross monthly income..... \$ \_\_\_\_\_

Mother \_\_\_ Stepmother \_\_\_ Female Guardian \_\_\_ gross monthly income..... \$ \_\_\_\_\_

Income from monthly alimony ..... \$ \_\_\_\_\_

Income from child support ..... \$ \_\_\_\_\_

Contribution from others for family support (not divorce or separation based support)\$ \_\_\_\_\_

Other Family Income:

Rental income property ..... \$ \_\_\_\_\_

Location(s) / Estimated market value / Average Occupancy Percentage

\_\_\_\_\_ \$ \_\_\_\_\_ %  
 \_\_\_\_\_ \$ \_\_\_\_\_ %

Worker's Compensation income (send verification)..... \$ \_\_\_\_\_  
 Unemployment Compensation (send verification) ..... \$ \_\_\_\_\_  
 Interest / dividends.....\$ \_\_\_\_\_  
 Social Security ..... \$ \_\_\_\_\_  
 Other: Source(s) \_\_\_\_\_ ..... \$ \_\_\_\_\_  
 Total Gross Monthly Income \$ \_\_\_\_\_

CURRENT EXPENSE INFORMATION

List all creditors and state unpaid balances and monthly payment.

<i>Creditor name</i>	<i>Goods or Services</i>	<i>Total Amt Owed</i>	<i>Mo Pymt.</i>
_____	Landlord or Mortgage holder (Primary Residence only, including any equity loans)	\$ _____	\$ _____
_____	Medical Insurance Premium	\$ _____	\$ _____
_____	Home / Renters Ins. Premium	\$ _____	\$ _____
_____	Life Insurance Premium	\$ _____	\$ _____
_____	Auto Insurance Premium	\$ _____	\$ _____
_____	Property Taxes	\$ _____	\$ _____
_____	Utilities (PGE, water)	\$ _____	\$ _____
_____	Telecommunications (tel/cell phones, internet)	\$ _____	\$ _____
_____	Car payments	\$ _____	\$ _____
_____	Food	\$ _____	\$ _____
_____	Clothing	\$ _____	\$ _____
_____	Medical/Dental Expenses (not covered by insurance)	\$ _____	\$ _____
_____	Transportation	\$ _____	\$ _____
_____	Alimony/Child Support pymt	\$ _____	\$ _____
_____	Support to other family members	\$ _____	\$ _____
_____	Tuition other school age children	\$ _____	\$ _____
	(If you are receiving aid for this tuition, indicate in "Other Family Income" section)		
_____	Total monthly taxes(federal, state)		\$ _____

Total Monthly Expenses \$ \_\_\_\_\_



Parent/Guardian Certification and Authorization

We declare and certify that all the information we have provided in this Financial Aid application is, to the best of our knowledge, accurate and complete. Furthermore, we authorize Saint Joseph Notre Dame High School to verify any and all of the information we have herein reported by any means necessary, including, but not limited to, obtaining credit reports, verifying employment, verifying credit balances, etc. We understand that the penalty for incomplete or inaccurate reporting will obligate us to pay full tuition and any fees for the year. In addition, we agree to pay any obligations to Saint Joseph Notre Dame High School not covered by financial aid, should it be granted, in a timely fashion as promised in the tuition contract.

Signatures:

Father  Stepfather  Male Guardian

\_\_\_\_\_

Date: \_\_\_\_\_

Mother  Stepmother  Female Guardian

\_\_\_\_\_

Date: \_\_\_\_\_