

Financial Aid Application

<u>Please complete all sections of this application; incomplete applications will not be reviewed.</u> <u>If applying for Financial Aid from outside the US, please complete sections as accurate as possible,</u> <u>substituting your financial data/background in appropriate places.</u>

		Part I	
		Student Information	
Student Name:			□ Male □ Female
Student Address:	Last	First	
	Street		
	City	State	Zip Code
Grade Applying For: _		Academic Year:	
Applying For: □ Board	ling Student	Day Student	
	Pare	nt/Guardian Information	
Father's Name:			
Parent Address:	Last	First	
	Street		
Occupation:	City	State	Zip Code
Employer:			
		Is this position □ Full T	
Mother's Name:			
Parent Address:	Last	First	
	Street		
Occupation:	City	State	Zip Code
Employer:			
Number of years with t	his company:	Is this position □Full Ti	me or ⊓Part Time

Income Tax Information

(USA Residents please attach a current Income Tax Return with this application.) Residents of other countries please attach as equivalent financial information as possible.

Income Tax Filing Status for USA Residents:

Single
Married, Joint Return
Married, Filing Separately
Head of Household

How many federal income tax exemptions did you claim?

How many children, including the student applicant, are residing in your home? And/or receiving support from you?

How many children entered above will be attending full-time childcare, tuition-charging preschools, schools or colleges? Enter at least one (1) for student applicant.

Parent Income & Expenses	
Total taxable income before deductions: In US Dollars	
A. Annual Salaries and wages – for parent 1 (Please attach a current wage statement)	\$
B. Annual Salaries and wages – for parent 2 (Please attach a current wage statement)	\$
C. Dividend and/or interest income	\$
D. Alimony Received	\$
E. Net Profit/Loss from business and/or farm. (If loss, please make notation)	\$
F. Other taxable income. (If loss, please make notation)	\$
Untaxed portion of payments IRA	\$
Keogh plan payments and self-employed SEP deduction	\$
Other IRS allowable adjustments to taxable income	\$
Total nontaxable income:	
A. Child support received for all children	\$
B. Social Security benefits for entire family	\$
C. Other nontaxable income	\$
IRS total itemized deductions form IRS Schedule A	\$
Total medical and dental expenses not reimbursed by insurance	\$
Unusual Expenses (please describe)	\$

Home (if owned)	\$ Present Market Value	\$ Amount of Unpaid Principal on 1 st Mortgage	\$
Year of 2 nd Mortgage	\$ Present Market Value	\$ Amount of Unpaid Principal on 1 st Mortgage	\$ Annual Payments on 1 st Mortgage
Year of Equity Loan	\$ Present Market Value	\$ Amount of Unpaid Principal On 2 nd mortgage/equity	\$ Annual Payments on 2 nd Mortgage/equity
All Other Real Estate	\$ Present Market	\$ All Other real estate unpaid Mortgage principal	\$ Annual Payments on other property
Bank Accounts-total of payments ch	\$		
Investments-net value (stocks, bonds	\$		
Indebtedness (Do not include mortga	\$		
If you do not own your own home & amount of annual rent.	\$		

Part II

Dollar amount that will be available to cover school costs for academic year:

From Parents Income & Assets	From Child Support	From Student's Asse & Earnings	ts From Friends and Trust	·	From other sources (please explain)
\$	\$	\$	\$		\$
*(Please Note: A dollar amount of "0" is unacceptable, resulting in an incomplete application.)					ncomplete application.)
List all family ca	urs (make and year)	:			
1		□ Own	□ Lease	□ Provi	ided by Employer
2		□ Own	□ Lease	□ Provi	ided by Employer
3		□ Own	□ Lease	□ Provi	ided by Employer
Current Total Ca	r Debt: \$	Annua	l Lease Expen	se: \$	

This application has been developed for Washington Academy.

All information supplied by the applicant will be held in the strictest of confidence

and will be used for determination of financial aid by Washington Academy only.

It will not be made available to any other individual or group not associated with this purpose.

Washington Academy admits students of any sex, race, color, religion, national or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of sex, race, color, religion, handicap, and sexual orientation, national or ethnic origin in the administration of its education policies, financial aid,

scholarship programs and athletic and other school administered programs.

Part III Complete this item only if student applicant's parents are separated, divorced, or never married.
 Divorced, Date of Divorce Separated, no court action Legally Separated, Date of Separation Never Married
Non-Custodial Parent's Full Name
Home Address:
Telephone Number:
Occupation:
Employer:
Name of Parent who claimed student as a tax exemption:
Is there any agreement specifying a contribution for this student's educational expense? □ Yes □ No
Parent's Certificate and Authorization
<u>We declare that the information reported on this form is to the best of our knowledge and belief,</u> <u>and is true, correct and complete. We agree to send an official copy of our latest tax return</u> <u>directly to Washington Academy.</u>
Signature of Father or Guardian Date

Home Telephone Number

Work/Cell Phone Number

Signature of Mother or Guardian

Home Telephone Number

Work/Cell Phone Number

Date