



Due to the school office on or before April 12, 2017 with \$15 application fee.

APPLICATION FOR TUITION ASSISTANCE

Family Name _____ Telephone (____) _____

Address _____

City _____ State _____ Zip _____

Father's Name _____ Mother's Name _____

Child/children live with: Mother____ Father____ Both Parents____ or Legal Guardian____

Parent/Parents/Legal Guardian current martial status is: Single____ Married____ Separated____ Divorced____ Widowed____

List your dependents, their ages and school (if applicable) that they attend:

Table with 4 columns: Name, Age, School Attending, Tuition Costs. Includes multiple blank rows for data entry.

Total Family Size _____

FINANCIAL NEED

What is your gross family income? A copy of your most recent W-2(s) and IRS Form 1040 must be attached.

Income earned from work by Wage Earner 1:.....\$ _____

Wage Earner 2:.....\$ _____

Other Income:.....\$ _____

Please explain in writing on the back of any extenuating circumstances that may not be clearly represented.

Do you own your home? Yes _____ No _____

The tuition rate is \$ _____

Certification and Signatures

(Certification: All of the information on this form is complete to the best of my (our) knowledge. If asked by an official of the Community Foundation of Western PA & Eastern OH, I (we) agree to give proof of the information that I (we) have given on this form. I (we) realize that this proof may include a copy of my (our) U.S. and/or State income tax return. I (we) also realize that if I (we) do not give proof when asked, the student may not get aid.)

Signature of Father (or Guardian) _____

Signature of Mother (or Guardian) _____ Date Completed _____

*Income guidelines are based on PA Household Maximum Income Guidelines