

TUITION ASSISTANCE APPLICATION

This form must be completed and returned to be considered for any financial need-based scholarships or any community tuition assistance sources.

Family Name _____ Telephone (____) _____

Address _____

City _____ State _____ Zip _____

Child/children live with: Mother _____ Father _____ Both Parents _____ or Legal Guardian _____

<u>Name</u>	<u>Age</u>	<u>School Attending</u>	<u>Tuition Cost</u>

Total Family Size _____

FINANCIAL NEED

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

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

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

Other Income:.....\$ _____

Do you own your home? Yes _____ No _____ Monthly mortgage/rent: _____

Certification and Signatures

(Certification: All of the information on this form is complete to the best of my (our) knowledge.)

Signature of Father (or Guardian) _____

Signature of Mother (or Guardian) _____

Date Completed _____

**Income guidelines are based on PA Household Maximum Income Guidelines*

Please explain in writing any extenuating circumstances that may not be clearly represented on this application.