

Financial Aid Application

Evergreen Community Charter School

Parent or Guardian Information

Name:	SSN:	Phone:
Current address:		
City:	State:	ZIP Code:
HOME E-mail:		
Student 1 Name:	Grade:	Teacher:
Student 2 Name:	Grade:	Teacher:
Student 3 Name:	Grade:	Teacher:
Student 4 Name:	Grade:	Teacher:

Parent or Guardian Employment Information

Current employer:		
Phone:		How long?
Position:	Hourly Salary (Please circle)	Annual income:

2nd Parent or Guardian Information

Name:	SSN:	Phone:
HOME E-mail:		
Current address:		
City:	State:	ZIP Code:

2nd Parent or Guardian Employment Information

Current employer:		How long?
Position:	Hourly Salary (Please circle)	Annual income:

OTHER CHILDREN IN YOUR FAMILY

Name	Age	School/College	Annual ED Cost

INCOME INFORMATION

	Parent or Guardian	2 nd Parent or Guardian
Annual income		
Salary Before Taxes		
Other Income		
Support Payments		
Total		
Expenses		
Living Expenses		
Other Annual Bills		
Total		
Net Income (total income minus total expenses)		

Assets		
Cash on Hand & in Accounts		
Real Estate Value		
Investment Value		
Other Assets (specify)		
Auto (year/model)		
Auto (year/model)		
Total		
Debts		
Mortgages		
Bank Cards & Credit Cards		
Auto (year/model)		
Auto (Year/model)		
Other Debts (specify)		
Total		

ESTIMATE OF NEEDS

Child	Field Trips		After School		Before School		Classroom Supplies	
	% of Cost I Can Provide	% Needed	% of Cost I Can Provide	% Needed	% of Cost I Can Provide	% Needed	% of Cost I Can Provide	% Needed

I (We) declare that the information is true and complete.

I (We) have enclosed a copy of my most recent income tax returns (personal) or the last two months of bank statements, or the last two months of pay stubs. I understand my application will not be processed unless this application is completed in its entirety and all required attachments are included with the application.

Signature: _____ Date: _____

Signature: _____ Date: _____