

SWS 2018-19 Financial Aid Application

Please submit separate PFS online at SSS.org
See program instructions for complete information

section a: parent/guardian information

Parent/Guardian Name: _____

Address: _____

Place of Employment _____ Years with Employer _____

Marital Status _____ Custody Status _____ Date of Birth _____

Best Contact Phone _____ Email _____

Parent/Guardian Name: _____

Address: _____

Place of Employment _____ Years with Employer _____

Marital Status _____ Custody Status _____ Date of Birth _____

Best Contact Phone _____ Email _____

Do both parents/guardians endorse enrollment at SWS? _____

Please explain any "no" answer in Circumstances Detail section.

section b: student information

Oldest Student Name _____ Grade in 2018-19 _____

Currently Enrolled at SWS _____ How many years at SWS? _____ New Applicant _____

2nd Oldest Student Name _____ Grade in 2018-19 _____

Currently Enrolled at SWS _____ How many years at SWS? _____ New Applicant _____

3rd Oldest Student Name _____ Grade in 2018-19 _____

Currently Enrolled at SWS _____ How many years at SWS? _____ New Applicant _____

section c: household members (other than parents/guardians)

Name _____ Relationship to Student _____

Name _____ Relationship to Student _____

Name _____ Relationship to Student _____

Name _____ Relationship to Student _____

section d: additional income (leave no fields blank)

Please indicate the amount of other income received in the 2017 calendar year. Please be sure to complete each line. Enter \$0 if no income was received from the source listed.

Social Security _____ Worker's Comp _____ Monetary Gifts _____

Investment Income _____ Child Support _____ Alimony _____

Income Tax Refund _____ 529 Plan _____ Other _____

section e: primary tuition resource (leave no fields blank)

From what financial sources do draw to pay SWS tuition? _____
(Example: employment income, investments, savings, tax refund, other)

Do you receive financial support from family, friends, employer or other(s) to help pay tuition? _____

Amount: \$ _____

section g: family assets (leave no fields blank)

Cash and Savings Accounts:

Current Balances - Checking _____ Savings _____ Other _____

Retirement: IRA _____ 401K/403B _____ Other retirement _____

Home Owners:

Market value _____ Mortgage balance _____ Mortgage payment _____

Year purchased _____ Purchase price _____

Renters:

Dwelling type _____ Years resided _____ Monthly rent _____

Other real estate owned:

Property type _____ Purchase price _____ Mortgage payment _____

Year purchased _____ Mortgage balance _____ Income from property _____

Business Interest: _____

section h : certification statement

By signing this financial aid application, I certify that all of the information reported is complete and correct. I understand the Susquehanna Waldorf School may apply EITC funds to any scholarship or portion thereof for which we may qualify. The Susquehanna Waldorf School may release personal and award information to program donors and agencies and may publicly announce names of scholarship recipients.

Signature of Parent or

Guardian

Date

Signature of Parent or

Guardian

Date

Non-discrimination Policy: The Susquehanna Waldorf School follows a policy of nondiscrimination in all aspects of operation and does not discriminate against any person on the basis of race, sex, religion, age or national or ethnic origin. All admissions and services are provided without regard to race, color, religious creed, ancestry, sex, disability, age or national origin. Any complaints of discrimination may be filed with the Office for Civil Rights, the US department of Health and Human Services, the Bureau of Civil Rights Complaints, the Department of Human Services, and/or the Pennsylvania Human Relations Commission.

section i: circumstances detail