

Confidential Tuition Assistance Application

Date:		
Child's Name:		
Home Phone:		
Mother's Name:		
Home Phone:		
Mobile Phone:	Email:	
Father's Name:		
Address:		
Home Phone:		
Mobile Phone:	Email:	

(202) 512-3122

-	years with their ages, for whom you a	
2. Annual salary (gross income)	of custodial parent or parents:	
Mother: \$	Father: \$	
3. Other annual income of custo	odial parent or parents:	
Child Supports: \$	Alimony: \$	
Findings Board of Directors at th Updated financial records (such a eligible for tuition assistance. Th	on and the attached worksheet is subject time the application is submitted are as tax returns) must be submitted each is application is incomplete without a eturn. Verification of income must be	nd on an annual basis. h year in order to remain attached copies of your
I certify that all statements and in Inc. to verify all statements.	nformation given above are correct ar	nd authorize Tiny Findings,
Signature of Parents/Guardians:		Date:
Signature of Parents/Guardians:		Date:



Tuition Assistance Worksheet

1.	Mother's (or Guardian's) Annual Salary: \$
2.	Father's (or Guardian's) Annual Salary: \$
3.	Child Support Received: \$
4.	Alimony Received: \$
5.	Forster Child Income Received: \$
6.	Rental Property Income: \$
7.	Other Income (please specify): \$
8.	SUBTOTAL (add lines 1-7) \$
9. 1	Number of Dependent Children: x \$2,150 = \$
	otract your deduction for dependent children from your subtotal income to get your revised and family income (subtract line 9 from line 8)
10.	REVISED ANNUAL INCOME: \$