



**TUITION PROGRAM APPLICATION 2009/2010**

Please complete all questions on both sides of this form, date and sign the application and return it to the office with a copy of your *signed* 2008 Federal Income Tax return with all forms, schedules, W-2s, K-1s and a recent paycheck stub by **June 3, 2009**.

To participate in the Tuition Program, you are expected to hold Waldorf education high on your list of financial priorities. An adjustment is not intended to support discretionary items such as after school activities, luxury items, second home, investment portfolios, debt-free status or large amounts of home equity. Having any of these situations does not preclude an adjustment but should be taken into consideration in relation to the school's needs.

Parent(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime phone \_\_\_\_\_ Evening phone \_\_\_\_\_

Email address \_\_\_\_\_

Children enrolled (or to be enrolled)

Name \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Grade \_\_\_\_\_

Please describe your marital status or household situation, family composition, and number of dependents.

\_\_\_\_\_  
\_\_\_\_\_

Please describe your employment situation and sources of financial support.

\_\_\_\_\_  
\_\_\_\_\_

If you are currently participating in the Tuition Program, have there been any changes in your employment, income, number of dependents, or living expenses?

Yes  No — If yes, please explain. (Use additional paper if necessary.)

\_\_\_\_\_  
\_\_\_\_\_

The information attached which is true and complete to the best of my/our knowledge, is in support of my /our application to the Waldorf School of the Peninsula for tuition adjustment. I/we understand that the school will treat the information we have supplied confidentially, and **I/we agree to hold confidential the exact details of any tuition adjustment agreed upon**. In evaluating any subsequent application, the tuition committee will take into account the manner in which the agreement was upheld.

Signature (1) \_\_\_\_\_ Date \_\_\_\_\_

Signature (2) \_\_\_\_\_ Date \_\_\_\_\_



**Tuition Program Application 2009/2010 Family \_\_\_\_\_**

| <b>Please list assets and liabilities</b> |  | <b>Please list your total <i>monthly net income</i></b> |  |
|---|--|---|--|
| Savings, securities, retirement, etc.     |  | Net wages, salaries, 401K withdrawals                   |  |
| Trust funds                               |  | Other income  |  |
| Life insurance (term or whole life)       |  | Regular gifts or other financial support                |  |
| Other Assets (cars, boats, collectibles)  |  | Child support   |  |
| <b>Total Assets</b>                       |  | Spousal support   |  |
| Mortgage balance                          |  | Rental income   |  |
| Vehicle loan balance                      |  | Food stamps   |  |
| Credit cards debt                         |  | Interest (savings, dividends, etc.)                     |  |
| Other debt                                |  | Other (tax refund, family financial support)            |  |
| <b>Total Liabilities</b>                  |  | Unemployment  |  |
| <b>Assets minus Liabilities</b>           |  | <b>Total</b>  |  |

**Please list your expenses below. Convert annual or periodic expenses to *monthly*.**

|   |                 |
|---|-----------------|
| Mortgage/Rent   |                 |
| Property taxes  |                 |
| Insurance (home, health, life)*   |                 |
| Loan/credit card payments   |                 |
| Spousal/Child Support   |                 |
| Tuition paid to other schools   |                 |
| Extra curricular activities for children (music, dance lessons, sports, etc.)             |                 |
| Tutoring  |                 |
| Child care  |                 |
| Food & household supplies   |                 |
| Utilities/telephone   |                 |
| Home maintenance/improvements   |                 |
| Auto expenses (car pmt, DMV, insurance, gas, maintenance)                                 |                 |
| Clothing  |                 |
| Health/medical (out of pocket expenses and deductibles)                                   |                 |
| Savings/investments* (include 401K and Employee Stock Purchase Plan (ESPP) contributions) |                 |
| Travel expenses/vacations   |                 |
| Fees/dues/contributions   |                 |
| Books/papers  |                 |
| Entertainment/recreation (movies, dining, events, etc.)                                   |                 |
| Other (please list, example: health club memberships)                                     |                 |
| * Do not include amount deducted from paycheck  | <b>Subtotal</b> |

| <b>This section must be completed.</b>                      | <b>10 Monthly</b> | <b>Yearly</b> |
|---|-------------------|---------------|
| a) Amount of school's tuition guideline for your child(ren) |                   |               |
| b) Amount of tuition you propose to pay                     |                   |               |
| c) Amount of assistance you are seeking (a minus b)         |                   |               |

|  |  |
|--|--|
| <b>Total</b> (Subtotal minus Amount of tuition you propose to pay) |  |
|--|--|

