

## Financial Assistance Application

Dear Parents:

100% financial assistance is available to families earning less than double the Federal Poverty Guideline and reduced fees for families earning less than three and one-half times the Federal Poverty Guideline. At the time you register your child for any fee-based program (excluding music lessons and preschool); you must complete a financial waiver. The application is a once-a-school year application and you may apply for multiple program assistance. The application period opens on each May 1<sup>st</sup> prior to the upcoming school year.

Please be aware that signed Federal Tax Returns for the most recent tax filing, Transitional Assistance Letters (issued in August), child support and alimony or SSI correspondence are required to document income before the level of assistance can be determined. All documents provided are kept confidential and are not included in any student file. All documentation received is kept for three years and then destroyed.

Enclosed is the Sudbury Public Schools Financial Assistance Application with the fee waiver sliding schedule on the reverse side. Completion of all information is necessary in order to make a determination. Incomplete applications will be returned.

Documentation of all income supporting your child(ren) is required. Copies can be made at the Business Office, at no charge, if you submit your application in person. If mailed, documents will not be copied and returned to you.

If you have any questions regarding the application process, please contact the business office at (978) 639-3203. Once a determination as to eligibility is made, you will be notified of that decision by letter. Please allow four weeks for processing.

If your family is experiencing unique financial hardships that do not meet the criteria of the application, please call the business office and speak to me directly.

Sincerely,

Mary M. Will  
Director of Business and Finance

**REQUIRED DOCUMENTATION AND PROCEDURE** (check off documents attached to application)

- \_\_\_ Provide most recent IRS 1040 Form (pages 1 and 2 for all wage earners supporting child/children).
- \_\_\_ Attach copies of supporting documentation (section from divorce decree) pertaining to child support and alimony.
- \_\_\_ Send copies of unemployment and paycheck stubs ONLY if changes have occurred since most recent tax filing.
- \_\_\_ Copy of Transitional Assistance Benefits Letter

*Failure to provide proof of all income will result in a delay in processing this request.*  
**DO NOT SEND ORIGINALS: they cannot be returned. Copies can be made for you at the Business Office.**  
*All documentation is treated confidentially and details are not shared with any other offices or departments.*  
*All documents are destroyed after three years.*

|                                   |           |            |         |
|-----------------------------------|-----------|------------|---------|
| First Name and Initial            | Last Name | Home Phone | Address |
| Other Parent /Guardian First Name | Last Name | Home Phone | Address |

**1a Check off Adults in Household:**

- Yourself                       Spouse/civil union/partner   
 Other  Name: \_\_\_\_\_ Relationship: \_\_\_\_\_                      Enter total adults claimed on tax

**1b List all Dependents living with you:**

| First Name | Last Name | Relationship To Self | FY11 Grade | FY11 School | Check if filing for fee assistance with: |       |          |        |
|------------|-----------|----------------------|------------|-------------|--|-------|----------|--------|
|            |           |                      |            |             | Bus                                      | Sport | Activity | Other* |
|            |           |                      |            |             |  |       |          |        |
|            |           |                      |            |             |  |       |          |        |
|            |           |                      |            |             |  |       |          |        |
|            |           |                      |            |             |  |       |          |        |
|            |           |                      |            |             |  |       |          |        |

\*Other would include **mandatory** school field trips and other school related fees; not events or overnight travel when **optional**..

**Note: This line should tie to line 6d, form 1040 of most recent tax return .**



Total number of Dependents claimed by you on your tax return listed in 1b above.....   
 Total number claimed by you on your tax return listed in 1a and 1b above.....

**2a Yearly Income supporting child(ren):**

*Enter Whole Dollars*

- Gross yearly Wages
- Social Security Death Benefit
- Disability Benefit
- If deceased – date of death

| Mother | Father | Step Mother | Step Father | Other | Totals |
|--------|--------|-------------|-------------|-------|--------|
|        |        |             |             |       | \$     |
|        |        |             |             |       |        |
|        |        |             |             |       |        |
|        |        |             |             |       |        |

**2b Other yearly income**

- TANF or Food Stamp #: \_\_\_\_\_
- Child Support.....
- Alimony.....
- SSI benefits.....
- Other income – List Source(s): \_\_\_\_\_

|  |
|--|
|  |
|  |
|  |
|  |

Total Gross Family Income from 2a and 2b

An adult household member must sign the application.

*I certify (promise) that all information on this application is true and that all income is reported. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose assistance.*

Sign here: X \_\_\_\_\_ Print name: \_\_\_\_\_

**MAIL TO:** Mary M. Will, Director of Business and Finance, Sudbury Public Schools, 40 Fairbank Road, Sudbury, MA 01776