

Hilldale School

2016-2017 Financial Aid Application

79 Florence St., Daly City, CA 94014 Website: www.HilldaleSchool.org (650) 756-4737

This Financial Aid Application should be submitted with the Registration Information form, but prior to submitting a Tuition Agreement. Upon approval for financial aid, a revised Tuition Agreement will be drafted.

The owners of Hilldale School are pleased to make available financial aid for the 2016-2017 school year. Current students will be given first priority through February 17, 2016. Once granted financial aid, the aid may continue for the student as long as the student continues to attend Hilldale School in good standing and as long as the family continues to qualify for the aid. A new, fully updated application must be completed each year to determine that year's financial aid grant. New students will be considered in two groups, on March 1st and on March 15th, after enrollment for current students has closed. Any remaining space after April 1st will be open to additional financial aid students.

Qualifications

You may qualify for financial aid if you meet the following requirements:

1. Your child is either currently attending or has been accepted to attend Hilldale School for the 2016-2017 school year.
2. Your family meets the school's income eligibility guidelines, which generally call for Hilldale School tuition for all children attending Pinnacle Schools to not exceed 17.5% of the family's Adjusted Gross Income. For multiple students attending private school, or for special circumstances, please contact the Business Office at (801) 359-2000.

On-Going Requirements

1. The student must meet all academic and other requirements of the school.
2. The student must contribute to the academic and social vitality of the school.
3. The parent and student must demonstrate interest in and support of the school.
4. Each family receiving financial aid is required to commit one hour of work to the school for each \$100 of financial aid received. Work hours are to be coordinated with the financial aid coordinator or the principal.
5. Each family must also be active in the Family Association, attend F.A. meetings whenever possible, and commit at least three hours of help toward Family Association events.
6. *If work hours are not completed within the school year, the signers will be financially responsible for any remaining hours at a rate of \$100/hour.*
7. Aid will not be considered for the following school year unless at least half of the work hours have been completed by re-registration time.
8. Basic Fund assistance may be available and will apply directly to the amount that a family must pay. Therefore, it is in a family's best interests to apply early (February) and to reapply yearly for this aid. *All new families must submit an application for Basic Fund assistance along with this application.*
9. Tuition assistance may be available from other sources: your employer, religious institution, extended family, etc. Those parents who demonstrate applications for such assistance from multiple sources will receive preference for financial aid from Hilldale School.
10. If requested, you must provide financial documents in October and February for a review of your salary to date.
11. Your family must remain financially eligible as detailed above.

How Do I Apply?

Complete this application and submit with half of the usual deposit (\$250, nonrefundable) in a sealed envelope to the Hilldale School Office together with a copy of your 2015 Federal Tax Return; a financial statement including all assets, liabilities, income, and major expenses; and official documents regarding any of these that are applicable: Cal Works (AFDC), TANF, Social Security, Disability, Worker's Compensation, Retirement Benefits, Foster Care, Unemployment, child support, or alimony payments *for each financially responsible party.*

The completed application and deposit may be submitted in advance of the support information in order to hold space in the class. However, failure to provide the remaining documents within two weeks of submitting this form, or by March 1st when incoming financial aid students are accepted, will release the F.A. student's space to new, interested incoming students.

I understand and agree to all of the above requirements and am applying with these in mind.

Initials Parent 1 _____

Initials Parent 2 _____

Children

I am applying for financial aid toward the tuition for the following students:

Student's Name: _____ Entering Grade: _____

Student's Name: _____ Entering Grade: _____

Student's Name: _____ Entering Grade: _____

I also have the following children attending other private schools and/or colleges, for which I am attaching proof of the tuition I am presently paying:

Student's Name: _____ School: _____ Entering Grade: _____

School's Actual Tuition: _____ Their F.A. grant to me: _____

Student's Name: _____ School: _____ Entering Grade: _____

School's Actual Tuition: _____ Their F.A. grant to me: _____

If these students are not yet receiving financial aid, please explain why: _____

Signatures

All financially responsible members of this family must sign below.

- * I certify that the information submitted in support of the Financial Aid Application is accurate in both detail and as a representation of our family's financial condition.
- * If my child receives financial aid, I promise to keep current on my portion of the tuition and to abide by all of the school's rules and regulations.
- * If my circumstances change, such as getting a job or a better job, I will promptly notify the School Business Office.
- * I understand that Hilldale School reserves the right to terminate attendance and/or financial aid for any reason.
- * I hereby release and indemnify Hilldale School from any and all claims and liabilities arising out of my child's participation at Hilldale School.

Signature: _____ Date: _____ Signature: _____ Date: _____

2016-2017 Tuition I Hope to pay: \$ _____ Amount from Other Sources above this amount: \$ _____

Applying for Federal Program: _____

Hilldale School: _____
Kathi or John Sittner

Date: _____

Parent 1 Financial Statement

Name: _____ Relationship: _____

Residence Address:

Home Phone: _____ Business Phone _____ Cell Phone: _____

Business Name and Address:

Email: _____

Income:

My income is: Salary \$ _____ Child support/alimony \$ _____ Net Investment income \$ _____

Real estate income \$ _____ Other income \$ _____

Received or expected tax refund from 2015 tax returns \$ _____

Other present aid \$ _____ Sources: _____

I am enclosing copies of my 2015 tax records: _____ (initial)

Assets:

Cash on hand and in banks \$ _____ Savings accounts \$ _____ Notes Receivable \$ _____

Real estate \$ _____ Investments \$ _____ Stocks & Bonds \$ _____

I will receive and apply toward tuition \$ _____ from relatives; \$ _____ from other institutions.

Expenses & Liabilities:

I have _____ people in my household for whom I personally claim responsibility (as shown on enclosed tax forms).

My mortgage / rent payment is: _____ My house is (circle one): Owned Rented

I have a second home mortgage payment \$ _____

Auto Loans \$ _____ Notes Payable to banks / others \$ _____ (Describe on back)

Credit Card Debt \$ _____ Unpaid Taxes \$ _____ Other liabilities \$ _____

Other liabilities or major expenses include:

I have the following special circumstances which I wish to have taken into account:

Continue on back

Work Agreement

I understand that, if granted financial aid ...

- I will have an obligation to do one hour of work for each \$100 in grant money to help the school in return.
- The work hours may not always be totally convenient, but nevertheless need to be done.
- Jobs requested by the school may not be exactly what I would prefer to do or have listed as my expertise.
- I am expected to make the necessary arrangements to see that my work time is completed. The school office and a financial aid coordinator will help me address my commitment.

I have the following job experience or personal abilities which might be used to help the school:

Best hours: _____

I agree to complete my work hours as expected above and to abide by all expected requirements in this application / contract and understand that if I do not complete them, I will be liable for repayment in the amount of \$100 for each uncompleted hour.

Signature: _____ Date: _____

Parent 2 Financial Statement

Name: _____ Relationship: _____

Residence Address:

Home Phone: _____ Business Phone _____ Cell Phone: _____

Business Name and Address:

Email: _____

Income:

My income is: Salary \$ _____ Child support/alimony \$ _____ Net Investment income \$ _____

Real estate income \$ _____ Other income \$ _____

Received or expected tax refund from 2014 tax returns \$ _____

Other present aid \$ _____ Sources: _____

I am enclosing copies of my 2013 tax records: _____ (initial)

Assets:

Cash on hand and in banks \$ _____ Savings accounts \$ _____ Notes Receivable \$ _____

Real estate \$ _____ Investments \$ _____ Stocks & Bonds \$ _____

I will receive and apply toward tuition \$ _____ from relatives; \$ _____ from other institutions.

Expenses & Liabilities:

I have _____ people in my household for whom I personally claim responsibility (as shown on enclosed tax forms).

My mortgage / rent payment is: _____ My house is (circle one): Owned Rented

I have a second home mortgage payment \$ _____

Auto Loans \$ _____ Notes Payable to banks / others \$ _____ (Describe on back)

Credit Card Debt \$ _____ Unpaid Taxes \$ _____ Other liabilities \$ _____

Other liabilities or major expenses include:

I have the following special circumstances which I wish to have taken into account:

Continue on back

Work Agreement

I understand that, if granted financial aid ...

- I will have an obligation to do one hour of work for each \$100 in grant money to help the school in return.
- The work hours may not always be totally convenient, but nevertheless need to be done.
- Jobs requested by the school may not be exactly what I would prefer to do or have listed as my expertise.
- I am expected to make the necessary arrangements to see that my work time is completed. The school office and a financial aid coordinator will help me address my commitment.

I have the following job experience or personal abilities which might be used to help the school:

Best hours: _____

I agree to complete my work hours as expected above and to abide by all expected requirements in this application / contract and understand that if I do not complete them, I will be liable for repayment in the amount of \$100 for each uncompleted hour.

Signature: _____ Date: _____