



Financial Assistance Application

My student has been accepted to Westminster Academy and the enrollment fee has been paid.

Please note that an application cannot be processed until the enrollment fee has been paid

A Family Information

Please answer every question. Please note that all questions are IMPORTANT and that your application will NOT be accepted if there are unanswered questions. If a question does not apply to you/your family, please write N/A.

Parent/Guardian A

1. Please check one: FA Renewal family / Years at WA: ____/____ Current family / Years at WA: ____/____ New family ____
 Last Name _____ MI _____ First Name _____
 Relationship to the student(s) _____ Email _____ Phone _____ ρHome ρWork ρCell
 Household Size: ____ # of Adults in Household: ____ # of Children/Ages: ____/____ # of Children in College: ____
 Current Employer / Position _____ / _____ Years with employer ____
 Name of church where you hold **active** membership and attend **regularly**:

Parent/Guardian B

2. Last Name _____ MI _____ First Name _____
 Relationship to the student(s) _____ Email _____ Phone _____ ρHome ρWork ρCell
 Current Employer / Position _____ / _____ Years with employer ____
 Name of church where you hold **active** membership and attend **regularly**: _____
 Parent/Guardian A & B are: ρ Married ρ Divorced ρ Legally Separated ρ Other _____

Other Parent

3. If the student(s) has another biological parent not listed in Question 1 or 2, please indicate the relationship between the parents.
 ρ Never Married ρ Divorced ρ Separated, no court action ρ Legally Separated Is there a joint custody agreement? ρ Yes ρ No
 Year of divorce/separation _____ First name _____ MI _____ Last Name _____
 Address _____ City _____ State _____ Zip _____

B Student(s) Information

Please complete this section for each child that is admitted or enrolled at any PK-12 grade school. Please indicate if the student receives any scholarship and the amount awarded. If you need additional space, please use the last page. Please add additional sheet for more than 3 students.

Student A

4. Full legal name of student _____ Gender ρ M ρ F Grade entering in the fall ____
 Current School _____ Length at current school: _____ Current tuition: \$ _____ year
 Student lives with: ρ Parent/Guardian A & B ρ Parent/Guardian A ρ Parent/Guardian B ρ Other _____

Student B

5. Full legal name of student _____ Gender ρ M ρ F Grade entering in the fall ____
 Current School _____ Length at current school: _____ Current tuition : \$ _____ year
 Student lives with: ρ Parent/Guardian A & B ρ Parent/Guardian A ρ Parent/Guardian B ρ Other _____

Student C

6. Full legal name of student _____ Gender ρ M ρ F Grade entering in the fall ____
 Current School _____ Length at current school: _____ Current tuition: \$ _____ year
 Student lives with: ρ Parent/Guardian A & B ρ Parent/Guardian A ρ Parent/Guardian B ρ Other _____

Sport(s)

Has this student had any disciplinary problems: **Y** **N** (please explain in separate sheet)

C Assets and Debts Worksheet

Please complete this section thoroughly. Please write N/A if a question does not apply.

SCHEDULE A - Cash on Hand and in Banks						
Type of Account	Name of Bank or Broker	In Name of	Are These Pledged		Date of Value	Current Balance
			Yes	No		
			Yes	No		
			Yes	No		
<i>(Carry to Page 3, Line 9a)</i> TOTAL =						

SCHEDULE B – Investment Accounts & Marketable Securities		
Name of Bank or Broker	Date of Value	Fair Market Value
<i>(Carry to Page 3, Line 9c)</i> TOTAL=		

SCHEDULE C - Real Estate Owned						
(1) Address of Property	(2) Property Description Type: Commercial (C), Residential (R), Agricultural (A). Use: Office, Warehouse, Home, Lot, Size: Square Footage			(3) Cost	(4) Date Acquired	(5) Current Market Value
	Type	Use	Size			
1						
2						
3						
<i>(Carry to Page 3, Line 9d)</i> TOTAL =						

SCHEDULE D - Life Insurance Carried, Including Whole Life and Group Insurance					
Name of Insurance Company	Owner of Policy	Beneficiary	Face Amount	Policy Loan	Cash Surrender Value
<i>(Carry to Page 3, Line 9f)</i> TOTAL=					

SCHEDULE E - Real Estate Mortgages					
(6) Name of Lender	(7) Title in name of	(8) Mortgage Balance	(9) Monthly Payment	(10) Monthly Rental Income	(11) Ownership
1					%
2					%
3					%
<i>(Carry to Page 3, Line 10c)</i> TOTAL =					

SCHEDULE F - Banks or Finance Companies Where Credit Has Been Obtained							
Secured / Unsecured	Name of Lender	Collateral Description	Type (Line of Credit, Term Loan)	Maximum Line Amount	Monthly Payment	Current Balance	Maturity
<i>(Carry to Page 3, Line 10a)</i> TOTAL=							

Attach additional sheets if necessary

D Family Income

Please complete thoroughly and do not leave questions blank. When calculating the yearly amount, please multiply by 12. For the yearly net income, please multiply paycheck amount by either a) 24 if paid twice a month, b) 26 if bi-weekly, or c) 52 if weekly. If a question does not apply to your situation, please write N/A.

Total Income (Yearly)

2020 Estimated 2021

7. a) Gross salaries and wages for Parent/Guardian A (If you own a business, please include the salary you pay yourself).....\$ _____ \$ _____
- b) Gross salaries and wages for Parent/Guardian B (If you own a business, please include the salary you pay yourself).....\$ _____ \$ _____
- c) Net income for Parent/Guardian A (paycheck amount X # of paychecks per year).....\$ _____ \$ _____
- d) Net income for Parent/Guardian B.....\$ _____ \$ _____
- e) Interest Income and/or taxable dividends income from 1099 statement(s).....\$ _____ \$ _____
- f) Alimony received or estimated.....\$ _____ \$ _____
- g) Other taxable and nontaxable income.....\$ _____ \$ _____
- h) Child support for all children received or estimated.....\$ _____ \$ _____
- i) Social Security benefits for entire family.....\$ _____ \$ _____
- k) Income tax filing status: 1.Single 2.Married, joint return 3.Married, filing separately 4.Head of household 5.Do not file

Business Income Information (Yearly)

2020 Estimated 2021

8. a) Net profit/loss from business (if loss, please use parentheses around the figures).....\$ _____ \$ _____
- b) Owner of the business: Parent/Guardian A & B Parent/Guardian A Parent/Guardian B Percentage of ownership _____%
- c) Type of business: _____

E Family Assets & Liabilities

Please complete worksheet (schedules A – E) before answering questions 10 (a-j) & 11. In the second column, please indicate "A", "B" or "J" for Parent/guardian A, B, or Joint.

Assets

A,B, or J

9. a) Cash on hand & in banks (Schedule A).....\$ _____
- b) IRAs, 401(k) and retirement assets\$ _____
- c) Marketable securities (Schedule B).....\$ _____
- d) Real Estate owned (Schedule C).....\$ _____
- e) Notes or loans receivable\$ _____
- f) Cash value life insurance (Schedule D)\$ _____
- g) Estimated value of closely held business\$ _____
- h) Estimated value of automobiles and other personal property\$ _____
- i) Other Assets – please itemize: 1. _____ \$ _____
2. _____ \$ _____
- j) **Total Assets** (please add lines a – j)\$ _____

Liabilities

A,B, or J

10. a) Credit Cards (Schedule F)\$ _____
- b) Notes, Equity Lines (Schedule F).....\$ _____
- c) Real Estate Mortgages (Schedule E)\$ _____
- d) Unpaid Taxes (income, property, etc.)\$ _____
- e) Other Debts – please itemize: 1. _____ \$ _____
2. _____ \$ _____
- f) **Total Liabilities** (please add lines a-e).....\$ _____
- g) **Net Worth** (please subtract line f from j)\$ _____

F Monthly Family Expenses

Please complete this section thoroughly. Please include only the expenses that you are currently paying.

Vehicles

11. Family cars owned or leased. Please list and describe all vehicles you own.
- | | Payment/month | Current debt | Monthly lease |
|--|---------------|--------------|---------------|
| 1. (make, model, year) _____ <input type="checkbox"/> Provided by employer/business <input type="checkbox"/> Own \$ _____ \$ _____ <input type="checkbox"/> Lease \$ _____ | | | |
| 2. (make, model, year) _____ <input type="checkbox"/> Provided by employer/business <input type="checkbox"/> Own \$ _____ \$ _____ <input type="checkbox"/> Lease \$ _____ | | | |
| 3. (make, model, year) _____ <input type="checkbox"/> Provided by employer/business <input type="checkbox"/> Own \$ _____ \$ _____ <input type="checkbox"/> Lease \$ _____ | | | |
12. Boats or other recreational vehicles owned or leased (make, model, year).
 _____ own \$ _____ \$ _____ Lease \$ _____
13. Please state if you will be using the following services: (1) Bus services \$ _____ / month (2) CASA \$ _____ / month
14. Have you made any major purchases during this past year, such as home improvements, Real Estate purchases, etc.? Yes No
 Please provide details: _____

Monthly Household Expenses / Bills

15. Do you tithe, regularly give or financially support your church? Yes No
16. Please list **only** the monthly expenses that you are currently paying.
- a) Tithes and offering (regular financial contribution to your church).....\$ _____
 - b) Mortgage / Rent (primary residence).....\$ _____
 - c) Property taxes and Homeowner's insurance (divide yearly amount by 12).....\$ _____
 - d) Home phone.....\$ _____
 - e) Cell phone.....\$ _____
 - f) Utilities (water, FPL, and cable).....\$ _____
 - g) Groceries.....\$ _____
 - h) Clothing.....\$ _____
 - i) Vehicle finance payments (total car payments + boats or other recreational vehicles).....\$ _____
 - j) Vehicle insurance premium.....\$ _____
 - k) Vehicle operation cost (gas + maintenance + repairs).....\$ _____
 - l) Medical out-of-pocket expenses (divide amount paid for the year by 12).....\$ _____
 - m) Life insurance premium (total amount for household).....\$ _____
 - n) Credit card payments (total minimum amount due on all credit card bills).....\$ _____
 - o) Student loan payments (total minimum amount due on all student loans).....\$ _____
 - p) Installment loan payments.....\$ _____
 - q) Daycare cost (infants and elderly care).....\$ _____
 - r) Total monthly expenses.....\$ _____
 - s) Annual Expenses (total monthly expenses X 12).....\$ _____
17. \$ _____ - \$ _____ = \$ _____
 gross annual household income total annual household expenses income after expenses
18. What is your retirement contribution? \$ _____ /month Value of retirement plan: \$ _____



Additional Information

Please complete this section thoroughly. Please do not leave any questions unanswered.

19. Have you asked your family, church, or employers for assistance (some employers are willing to assist)? Yes No

20. Do you have a family member, a friend, or others who could assist you with tuition payments? Yes No

Please explain: _____

21. If both parents are not employed, please state the hardship: _____

22. Do you receive or expect to receive any of the following scholarships and/or vouchers:

Step Up For Students Scholarship _____ McKay Scholarship _____ CRPC Member Voucher _____ Other _____

23. After careful thought and prayer, what is the **total yearly amount of tuition per child** your family can commit to for a Westminster Academy education.

24. To help us better understand your family's financial situation please clearly state the reason you are applying for financial assistance. Please attach additional pages if you need more space.

25. Please complete if you have previously received financial aid.

Financial assistance is available as a result of the generosity of donors who give to the Westminster Academy Annual Fund. Testimonials from recipients are instrumental in soliciting donations to the Annual Fund. If you had the opportunity to express your appreciation to someone who gives to the Annual Fund, what would you say to them about the impact Westminster Academy has had on your child? Your testimonial will not be shared without your permission. To give permission to share anonymously, please check the box below your testimony.

Testimonial:

I give permission for all or part of my testimonial to be shared anonymously.

***CERTIFICATION: I declare that the information reported is true, correct and complete. I verify that I have read and submit to all the terms of the financial assistance program.**

Father's Signature

Mother's Signature

Date

**Westminster Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities made available to students of the school. It does not discriminate on the basis of race, color, national and ethnic origin in the administration of its educational policies, admissions policies, financial assistance, athletics or any other school administered programs, unless a particular status protected by federal, state, or local laws contradicts the deeply held religious convictions of the school or Coral Ridge Presbyterian Church.