

Southwestern Academy

Confidential Parent Financial Statement

Please return this statement and supporting documents to the Admissions Office, San Marino.

[Office Use: Student #: _____]

Student's Name: _____ Academic Year: _____
First MI Last

Home Address:

Number Street (Apt.) City State ZIP

Financial assistance can be a direct grant or a tuition deferment. In either case, parents or guardians should submit the financial aid request form and supportive materials to the Financial Advisory Board at the San Marino campus. The board makes all determinations regarding financial aid. All materials concerning financial aid are strictly confidential, for the use of the Financial Advisory Board only, and are not shared with other school staff nor retained with the student's permanent records. Parents and students who receive financial aid are requested to volunteer time to the school. **Incidental fees are not included in the Financial Aid award. Monthly payments may be paid over a ten-month period (or less) between August and May. All accounts must be current by semester exams.**

Please enter the appropriate amounts on the lines below.

1. Total tuition, room and board costs = \$20,850 (Tuition) plus *\$23,750 (Room and Board) **if applicable*
2. Minus amount of personal family resources available to fund tuition.
3. Minus amount of resources available from other additional sources (loans, relatives, trusts, etc.)
4. Total amount of aid requested from Southwestern Academy

\$ 44,600 - (\$ _____ + \$ _____) = \$ _____
1. Tuition, R/B **2. Family resources** **3. Additional resources** **4. Total Aid Requested**

Additional Documents –You must return the following documents with this request in order to be considered:

1. Copy of the most recent 1040/1040A income tax filing for all responsible parents.
2. Form 4506 - Request for Copy of Tax Form *(Form included)*
3. Comments from parent and/or student and note on any significant circumstances *(Page included)*

Mother's Employer: _____ Phone: _____

Father's Employer: _____ Phone: _____

Please check one:

I give permission to Southwestern Academy to talk with above employers if necessary to support this aid request.

I **do not** give permission to Southwestern Academy to talk with above employers to support this aid request.

Mother's Name: _____ Father's Name: _____

Signature: _____ Signature: _____ / ____ / ____
Signature of Mother or Guardian Signature of Father or Guardian Date Signed

Southwestern does not discriminate on the basis of race, color, national and ethnic origin, or sex in the administration of its educational, admissions, athletics, or other school-administered programs including consideration of financial assistance.

For Office Use Only –
 Request Submitted: _____ With Documents: _____ Decision: _____ Amount Granted: _____
 Additional Information: _____