

**TUITION ASSISTANCE POLICY**  
**EVERY LITTLE BLESSING PRESCHOOL**

1. Families requesting tuition assistance will fill out an application and provide their most recent Federal Income Tax report.
2. The Director will create a spreadsheet with pertinent information regarding the families' requests but will not include any names.
3. The school board or a committee designated by the school board will review the information and determine the amount of tuition assistance each family will receive.
4. The criteria for determining tuition assistance will be the following:
  - a. Household income
  - b. Family members or other dependents in the home
  - c. Special circumstances
  - d. Amount of money budgeted toward tuition assistance
5. Tuition assistance will be awarded in a consistent manner.
6. ELB admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to the students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, scholarship programs, and any other school programs.

**APPLICATION FOR TUITION ASSISTANCE**

**EVERY LITTLE BLESSING PRESCHOOL**

Date \_\_\_\_\_

Name of Student \_\_\_\_\_ Date of Birth \_\_\_\_\_

Father or Guardian \_\_\_\_\_

Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Occupation/Position \_\_\_\_\_ Employer \_\_\_\_\_

Mother or Guardian \_\_\_\_\_

Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Occupation/Position \_\_\_\_\_ Employer \_\_\_\_\_

**Other Dependents:**

Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

If other persons are dependent on the family for support, please indicate and specify how related \_\_\_\_\_

\_\_\_\_\_

**Total salaries & wages before taxes:**

Father's total monthly salary \$ \_\_\_\_\_

Mother's total monthly salary \$ \_\_\_\_\_

Other monthly income \$ \_\_\_\_\_

Total \$ \_\_\_\_\_ x 12 Months = \_\_\_\_\_ Yearly Income

Total Federal Income Tax paid last year \$ \_\_\_\_\_

Present Home Market Value \$ \_\_\_\_\_ Unpaid Mortgage \$ \_\_\_\_\_

Personal Savings & Checking Accounts \$ \_\_\_\_\_

Net Value of Any Other Investments \$ \_\_\_\_\_

Total Consumer Indebtedness \$ \_\_\_\_\_

If there are special circumstances affecting your finances, please give details:(family illnesses, divorce, loss of job, etc.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please attach most recent Federal Income Tax Report**

Signature \_\_\_\_\_

Date \_\_\_\_\_

**For Office Use Only:**

Scholarship Amount:	Year	Batch Date	Batch Reference
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____