



FLINTRIDGE PREPARATORY SCHOOL

Financial Aid Application 2012–2013

APPLICANT

Student _____
LAST NAME FIRST NAME FULL MIDDLE NAME

Boy Girl Birth date _____
MONTH DAY YEAR

Student's mailing address _____
STREET CITY STATE ZIP

Grade applicant will enter _____

Check if applicable:

Parents separated or divorced Father unable to work Mother unable to work Father deceased Mother deceased

Applicant lives with (*check all that apply*):

Father Mother Stepfather Stepmother Male Guardian Female Guardian

PARENT/GUARDIAN 1

Name _____ Home phone _____ Cell phone _____

Home address _____
STREET CITY STATE ZIP

Occupation _____ Title _____ Work phone _____

Employed by _____ Years with firm _____

PARENT/GUARDIAN 2

Name _____ Home phone _____ Cell phone _____

Home address _____
STREET CITY STATE ZIP

Occupation _____ Title _____ Work phone _____

Employed by _____ Years with firm _____

ANNUAL INCOME

	2011 <i>(check box if estimated)</i>	2012 <i>(check box if estimated)</i>
Yearly gross household earnings (salary and wages)	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
Dividends/Interest	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
Profit/Loss from business	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
Alimony	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
Child support	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
Social Security	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
Other (specify)	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
Total yearly income	\$ _____	\$ _____
Total income taxes paid		
Fed/FICA	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
State/SDI	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>

MONTHLY EXPENSES

	Current Balance	Monthly Payment
Home: <input type="checkbox"/> Mortgage <input type="checkbox"/> Rent	_____	_____
Other real estate	_____	_____
Vehicles <i>(make/model/year)</i>		
_____	_____	_____
_____	_____	_____
_____	_____	_____
Credit cards		
_____	_____	_____
_____	_____	_____
_____	_____	_____
Other loans <i>(description)</i>		
_____	_____	_____
_____	_____	_____
Monthly household expenses		
Auto repair/maintenance/gas		_____
Utilities		_____
Food		_____
Clothing		_____
Insurance: Property/liability/earthquake/FAIR Plan		_____
Insurance: Auto		_____
Insurance: Health/life		_____
Lessons/school supplies		_____

Monthly Household Expenses (continued)

Monthly Payment

Personal care _____

House repair/maintenance _____

Property taxes _____

Vacations/travel _____

Sports _____

Gifts/donations _____

Entertainment/restaurants _____

Other: _____

Other: _____

Total monthly expenses \$ _____

Medical expenses not covered by insurance (please explain) _____

Other unusual expenses (please explain) _____

Educational expenses for all children in the family *except* the applicant:

Child's name	Age	School	Yearly expense (family responsibility less financial aid and/or scholarship)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total educational expenses \$ _____

Total amount family could pay toward Prep tuition \$ _____

The financial aid program is need-based. At the bottom of this page (attach a separate page if necessary), please explain why you feel you qualify for financial aid. Include all information, including unusual circumstances, which will help us to better understand and help your family. If either parent/guardian is not employed, please explain. Please type or print.

Be assured that the school considers the financial aid program to be highly confidential and personal, and treats all information accordingly.

(continued on back)

ADDITIONAL DOCUMENTS

Please send copies of last year's federal tax returns by the due date (February 17, 2012). Applicants with decrees of divorce which make specific provisions regarding financial obligations toward an applicant's education should attach copies of those portions of the decree.

Applicants who do not provide substantiating documentation upon the school's request, such as the documents described above, will be deemed ineligible to receive financial aid.

CERTIFICATION

I/We declare that the information reported on this form, to the best of my/our knowledge and belief, is true, correct and complete.

I/We agree to supply Flintridge Preparatory School with federal tax returns as proof of income, and will, if so requested by a representative of Flintridge Preparatory School, send a signed IRS form 4506 directly to the School.

Signature _____ Date _____

Signature _____ Date _____