



## **KLAHANIE SCHOOL TUITION ASSISTANCE FORM**

The purpose of the Klahanie School Scholarship Fund is to help families who could not attend Klahanie School without financial assistance. Please respond to the following questions and return this application to the Klahanie School Scholarship Representative Executive Director.

In an effort to fairly review all applications, the amount awarded is determined by the amount of scholarship funds available in Klahanie School's current budget and the number of families applying for scholarship assistance. Klahanie School Scholarship will provide up to 30% of the tuition fee. If you need additional assistance beyond 30% please outline your special circumstances on this application.

Scholarship applications are accepted throughout the year.

### **ELIGIBILITY**

HOUSEHOLD is defined as all persons, including parents, children, grandparents, and all people related or unrelated who live in your home and share living expenses. Do not include foster children.

HOUSEHOLD INCOME is considered to be the income each household member received before taxes. This includes wages, social security, pension, unemployment, welfare, child support, alimony, and any other cash income.

**Child's Name:** \_\_\_\_\_

**Child's Class:** \_\_\_\_\_

**Parent/Guardian Name(s):** \_\_\_\_\_

**Parent/Guardian Phone Number(s):** \_\_\_\_\_

**Parent/Guardian email:** \_\_\_\_\_

1. What is your household size?

2. What is your household monthly income?

3. How much total monthly scholarship support from Klahanie School Scholarship Fund will you require to keep your child enrolled at Klahanie School?

4. The annual programming registration fee is not included in the scholarship award. The registration fee and your child's tuition less the scholarship award will be due on time as stipulated in the Parent Handbook. Do you foresee any problem fulfilling your financial commitments as stated?

Yes / No

5. It is expected that you will remain in good standing at Klahanie School by attending all parent education meeting and remaining current with your financial obligations. Do you foresee any conflict that would not allow you to remain in good standing?

Yes / No

6. Is there additional information you wish the scholarship committee to know when considering your family for a scholarship award or special circumstances that require additional assistance? (Please provide additional sheet if needed)

I certify that the information I have provided on this application form is correct. If this request is accepted, I agree to fulfill the obligations of a participating member in a parent cooperative preschool. Also, if my financial position changes I will notify Klahanie's Scholarship Board Representative/ Executive Director. I understand that I must remain a member in good standing and remain current on my tuition payments.

Applicant's Signature

\_\_\_\_\_

Date \_\_\_\_\_

**Please submit this form to the current Klahanie School Registration/Scholarship Board  
Representative Executive Director**

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**This section to be filled out by Klahanie School Registration/Scholarship Board**

Child's Name & Class:

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Monthly Tuition: \_\_\_\_\_

Approved Scholarship Amount: \_\_\_\_\_

Klahanie School Scholarship Board Signature & Date:

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