

# Queen of Peace High School

191 Rutherford Place  
North Arlington, NJ 07031

Web Site: [www.qphs.org](http://www.qphs.org)

## FINANCIAL AID APPLICATION 2017-2018

We encourage families to submit completed applications as soon as possible. The DEADLINE is Friday, February 17th, 2017.

No application will be considered after this date.

In order to be considered, your application must be **answered in full** and it must include the following items:

- Copy of your 2015 Federal Tax Return (Including all Schedules)
- Copy of your 2015 W2 Form (or November Assistance check)
- **Copy of your last Paystub (Very Important)**
- **Copy of your 12/31/16 Paystub or W2 (If Possible)**
- Copy of a proof of residence (Phone bill, Utility Bill)
- Copy of student's 1<sup>st</sup> report card of 2016-17 SY.

RETURN TO QPHS ATTENTION **ADMISSIONS DEPARTMENT**

Student's Name: \_\_\_\_\_  
Grade going into: \_\_\_\_\_

\*Please note: If you answer Other to any question, Please provide an explanation at the end.

## Financial Aid Form: 2017-2018

### A. PARENT OR GUARDIAN

Circle One: **Father**                      **Mother**                      **Stepparent**                      **\*Other**

Last Name                                      First Name                                      MI

\_\_\_\_\_

SS#                                      Age                                      E-mail Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Address                                      Home Phone Number

\_\_\_\_\_

\_\_\_\_\_

City                                      State                                      Zip Code

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Occupation/Title/Rank                      Work Phone Number

May QPHS contact you at work if there are any questions? \_\_\_\_\_ Yes \_\_\_\_\_ No

Employed by \_\_\_\_\_

How Long? \_\_\_\_\_

Self employed? \_\_\_\_\_ Yes \_\_\_\_\_ No

## B. PARENT OR GUARDIAN

Circle One: **Father**

**Mother**

**Stepparent**

**\*Other**

Last Name

First Name

MI

SS#

Age

E-mail Address

Address

Home Phone Number

City

State

Zip Code

Occupation/Title/Rank

Work Phone Number

May QPHS contact you at work if there are any questions? \_\_\_\_\_ Yes \_\_\_\_\_ No

Employed by \_\_\_\_\_

How Long? \_\_\_\_\_

Self employed? \_\_\_\_\_ Yes \_\_\_\_\_ No

## C. FAMILY INFORMATION

1. Number of family members who will reside in my/our household during the 2015-2016 school year:

Parents \_\_\_\_\_ Children \_\_\_\_\_ \*Other \_\_\_\_\_

2. Current Marital Status of Parent/Guardian in Section A (Check one)

a. \_\_\_ Single

d. \_\_\_ Divorced

g. \_\_\_ \*Other

b. \_\_\_ Married

e. \_\_\_ Divorced/remarried

c. \_\_\_ Widowed

f. \_\_\_ Separated

## D. DIVORCED OR SEPARATED PARENTS

### Non-Custodial Parent Information

1. Date of Divorce or Separation (Month/Year) \_\_\_\_\_
2. \_\_\_\_\_  

Last Name	First Name	MI
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3. According to court order, when will child support end?  
 (Month/Year) \_\_\_\_\_
4. Total amount of child support **received** to date in 2015 by parent listed in Section A or B.  
 \$ \_\_\_\_\_.
5. Total amount of child support **paid** to date in 2015 by parent listed in Section A or B.  
 \$ \_\_\_\_\_.
6. Is there any agreement specifying a contribution for student's education?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If YES, how much per year? \$ \_\_\_\_\_
7. Who claimed student as a tax dependent in 2015 \_\_\_\_\_
8. Do special circumstances exist? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 If YES, please explain below.

## E. STUDENTS AT TUITION-CHARGING SCHOOLS

How many children will attend a tuition charging school, Pre-K, elementary school, secondary school, or college in the fall of 2016 \_\_\_\_\_.

Please list below each of those students, their grades and the name of the school(s) they wish to attend next fall. Don't forget to list the applicant(s) and their grade for the fall of 2015.

PLEASE LIST APPLICANTS FIRST. PLEASE CHECK IF ADDITIONAL STUDENTS ARE ATTACHED \_\_\_\_\_.

Student Last Name	Student First Name	MI	Grade in the fall of 2016	Name of school student plans to enter in the fall of 2016	Amount we feel we can pay per year toward tuition	Tuition charged per student
1)						
2)						
3)						

## F. PARENT'S TAXABLE INCOME

YOU MUST INCLUDE THE FOLLOWING DOCUMENTATION FOR YOUR APPLICATION TO BE COMPLETE:

### If you file an income tax return

- A complete photocopy of your 2015 IRS Form 1040, 1040A or 1040EZ (Including all schedules).
- Photocopies of all 2015 W2 forms and/or 1099 forms from all employers for any wage earning parent residing with the applicant(s)

### If you don't file an income tax return (check all that apply)

- Social Services Grant letter
- Food Stamps Grant letter
- Social Security Benefits Statement

## G. NON-TAXABLE INCOME RECEIVED IN 2015-16

\*List the total received for all of 2015-16, not monthly amounts

1. Child Support \$ \_\_\_\_\_
2. Welfare (AFDC/ADC) \$ \_\_\_\_\_
3. Food Stamps \$ \_\_\_\_\_
4. Social Security/SSI \$ \_\_\_\_\_
5. **TOTAL** non-taxable income for 2015-16 \$ \_\_\_\_\_

## H. HOUSING INFORMATION

1. Do you own or rent your residence? \_\_\_ Rent \_\_\_ Own
2. If renting, what is your monthly rental payment? \$ \_\_\_\_\_
3. If you own, what is your monthly mortgage? \$ \_\_\_\_\_

## I. ADDITIONAL MAJOR MONTHLY EXPENSES

Other Tuitions Paid: \_\_\_\_\_  
Car Payment: \_\_\_\_\_  
Car Insurance: \_\_\_\_\_  
Food: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Cable/Internet: \_\_\_\_\_  
Average Utilities: \_\_\_\_\_

Please list any other major monthly expenses that you feel QPHS should be aware of during this review process:

**J. Average Monthly Income**

**Total Monthly:** \_\_\_\_\_

**K. PARENT’S FINAL CHECKLIST, CERTIFICATION AND AUTHORIZATION**

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

I/We have enclosed the necessary documentation and understand that if these items are not enclosed, our application will not be processed.

Parent or Guardian (Section A) \_\_\_\_\_

Date Completed \_\_\_\_\_

Parent or Guardian (Section B) \_\_\_\_\_

Date Completed \_\_\_\_\_

I/we understand that submitting false information will result in dismissal of our child from Queen of Peace HS and an obligation to repay any aid applied to our account.

I/we understand that if my child does not complete the school year for any reason whatsoever, no aid will be applied to my account and I will be responsible for the full amount of tuition due at the time.