

Name: _____
Application for year **2020-2021**



**Application Supplement for Financial Aid
St. Michael's Episcopal School
Richmond, Virginia**

Information provided on this application supplement will be held in strict confidence. It will not be made available to any group or individual not directly concerned with the granting of financial aid by St. Michael's.

Please answer all questions on this application form. Kindly return this form to:

Head of School

St. Michael's Episcopal School

10510 Hobby Hill Road

Richmond, Virginia 23235

This form must be returned to the school office by **January 15, 2020 for returning families.**

New families must return this form to the school office by February 1, 2020.



Application Supplement for Financial Aid
Application for year **2020-2021**

Name of candidate:	
Address:	
Date of Birth:	

Name of Parent/Guardian 1:	
Address:	
Phone:	Email:

Name of Parent/Guardian 2:	
Address:	
Phone:	Email:

Other dependent children:

Name	Age	School	Amount of tuition paid by Parent	Amount of aid received by Parent

List other dependents, if any. In the case of dependents living outside your home, indicate approximate amount of financial assistance you give them each year.

Aside from your family obligations, do you have any commitments, which should be considered in order to obtain a fair estimate of your financial situation (i.e. mortgage payments). If so, give details.

Employer of Parent/Guardian 1:	Position:
Employer's Address:	

Employer of Parent/Guardian 2:	Position:
Employer's Address:	

Sources of Income:

Salary of Parent/Guardian 1:	\$
Salary of Parent/ Guardian 2:	\$
Bonus and commissions	\$
Dividends	\$
Real Estate income	\$
Other income (itemize)	\$
TOTAL	\$

Are there any other funds that might be applied to the candidate's education, such as legacies, gifts, trust funds, educational insurance, aid from relatives, friends, or organizations? Give details.

In view of the financial circumstances outlined above, what is the minimum grant you need in order to meet all school charges? _____

Have you applied for a bank loan for this purpose? _____

Have you applied for financial aid from any other school for this child? _____

If so, list the schools: _____

List all automobiles owned by you and members of your family:

Make	Model	Year

List all social or country clubs to which you, or the members of your family, belong and the annual cost each such club membership.

The school will welcome any further statement you may care to make which may aid it in determining the amount of financial assistance that is appropriate for the school to grant. (If any of your answers to questions on this application form seem to you to be likely to create a false impression, feel free to clarify your situation.)

Signed: _____ Date: _____

Print Name: _____