



Park School Letter of Understanding

for Families Applying for Tuition Assistance

DIRECTIONS: PLEASE COMPLETE AND UPLOAD TO YOUR PFS PORTAL ON SOLUTIONSBYSSS.COM (SSS CODE 5668). THIS FORM IS DUE DECEMBER 1.

We have found that building a true School-Family partnership is the best way to have an effective Tuition Assistance Program. For that reason, we have posted an important document online entitled: *Tuition Assistance Program: Policies, Responsibilities, and Guidelines*.

This document can be found under the “Affording Park” section of the website (www.parkschool.net/admission/affording-park). It is critical reading for all families currently participating in the program, and for families new to the tuition assistance program.

Section 1: Policies

THIS SECTION OUTLINES THE GOALS AND OBJECTIVES OF THE PROGRAM, DEFINES ELIGIBILITY, EXPLAINS FUNDING PRIORITIES, AND AFFIRMS OUR COMMITMENT TO CONFIDENTIALITY.

Section 2: Responsibilities

- PART ONE DESCRIBES PARK’S RESPONSIBILITIES, MANY OF WHICH STEM FROM THE NATIONAL ASSOCIATION OF INDEPENDENT SCHOOLS’ *Principles of Good Practice for Financial Aid Administration*.
- PART TWO DESCRIBES PARENTS’ RESPONSIBILITIES REGARDING THE APPLICATION PROCESS, PAYMENTS, AND COMMUNICATION.
- PART THREE OUTLINES THE LAYERS OF ADMINISTRATIVE RESPONSIBILITY IN THE MANAGEMENT OF THIS PROGRAM.

Section 3: Guidelines

THIS SECTION EXPLAINS THE CONCEPT OF DISCRETIONARY INCOME AND THE OTHER FACTORS TAKEN INTO CONSIDERATION WHEN MAKING TUITION ASSISTANCE DECISIONS. IT ALSO ADDRESSES A NUMBER OF SPECIAL CIRCUMSTANCES REGARDING BOTH INCOME AND ASSETS.

In writing *Tuition Assistance Program: Policies, Responsibilities, and Guidelines*, Park School automatically accepts its outlined responsibilities. To create a true partnership, your understanding of this document is critical. Therefore, we require your signature below to indicate that you have read and understand the contents, and that you accept your responsibilities in full.

name of student applicant(s) (please print)

signature

date

signature

date

LETTER OF UNDERSTANDING



Park School Institutional Aid Application

for Students Applying for Tuition Assistance

INSTITUTIONAL AID APPLICATION

DIRECTIONS: PLEASE COMPLETE THIS FORM AND UPLOAD TO YOUR PFS PORTAL ON SOLUTIONSBYSSS.COM (SSS CODE 5668). THIS FORM IS DUE DECEMBER 1.

Student Applicant(s)

_____	_____
name	entering grade
_____	_____
name	entering grade
_____	_____
name	entering grade
_____	_____
name	entering grade

Applicant(s) live(s) with *(check all that apply)*:

- both legal custodial parents
 legal custodial parent and stepparent
 legal custodial single parent
 guardians

How many siblings does the applicant have? _____ Total number of people living in primary household? _____

Primary Household(s)

PARENT/GUARDIAN 1

relationship to applicant(s)

first name last name

home address

city, state, zip code

primary telephone

email address

PARENT/GUARDIAN 2

relationship to applicant(s)

first name last name

home address

city, state, zip code

primary telephone

email address

Other Parent(s) / Guardian(s)

PARENT/GUARDIAN 3

relationship to applicant(s)

first name last name

home address

city, state, zip code

primary telephone

email address

PARENT/GUARDIAN 4

relationship to applicant(s)

first name last name

home address

city, state, zip code

primary telephone

email address

Who has legal custody of the applicant? _____

Referring to the applicant's legal custodial parent(s), check all that apply:

- married
 divorced
 separated
 never married
 single parent
 widowed

Who should receive correspondence regarding Park's Tuition Assistance Program? Check all that apply.

- parent/guardian 1
 parent/guardian 2
 parent/guardian 3
 parent/guardian 4

Please answer all questions, including those that also appear on the SSS Parents' Financial Statement.

1. Does your family receive financial support from relatives or other sources, e.g. IRA distributions, short-term loans, etc.? (include support for education, trips, camps, etc., as well as in-kind support such as housing)

no yes annual amount: \$ _____

If yes, please explain:

2. Does your family provide financial support for relatives, e.g. live-in grandparents, relatives overseas?

no yes annual amount: \$ _____

If yes, please explain:

3. If your children are of school age and both parents are not employed full-time, please explain circumstances.

4. Has there been a job change, or has your income increased or decreased significantly this year? Please explain.

5. Have you married, divorced, or separated this year? Or, has the number of people in your household changed this year?

6. Please complete the following for the **current** calendar year. This information supplements the SSS Report and will allow us to better understand your family's complete financial circumstances. If you would like to further discuss your financial situation, please schedule a meeting with Mennette Dubose San-Lee by calling 410-339-4130.

a. \$ _____ average monthly credit card payments check here if paid in full each month

b. \$ _____ monthly car payment(s)

c. \$ _____ year-round cost of employment-related child care (beyond school tuition)

d. \$ _____ summer camp, sports clinic, etc. (**not** employment-related child care)

e. \$ _____ special event expenses (wedding, bar/bat mitzvah, etc.) Please explain in section 9.

f. \$ _____ extracurricular activities (tuition for classes in art, music, sports, etc.)

g. \$ _____ home repairs (Please explain any amount over \$1,000 in section 9.)

h. \$ _____ vacation/travel (for all family members)

i. \$ _____ household help (Please explain in section 9.)

j. \$ _____ charity/donations/tithing

k. \$ _____ other (Please explain in section 9.)

7. Please indicate current value of any 529 plans held in the name of the applicant child(ren).

8. Please identify additional Park School services you expect to use during the upcoming academic year.

<p>BUS TRANSPORTATION:</p> <p><input type="checkbox"/> A.M. <input type="checkbox"/> P.M.</p> <p><input type="checkbox"/> FALL <input type="checkbox"/> WINTER <input type="checkbox"/> SPRING</p>	<p>TUTORING SUPPORT SERVICES:</p> <p><input type="checkbox"/> ONCE PER WEEK</p> <p><input type="checkbox"/> TWICE PER WEEK</p>	<p>LOWER SCHOOL EXTENDED DAY:</p> <p><input type="checkbox"/> 4:30 P.M. <i>or</i> <input type="checkbox"/> 6:00 P.M.</p> <p> _____ # DAYS PER WEEK</p> <p><input type="checkbox"/> FALL <input type="checkbox"/> WINTER <input type="checkbox"/> SPRING</p>
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9. Other relevant information: Please add any additional information that will help us to fully understand your financial circumstances. Please do not feel constrained by this space — use additional paper as necessary.

