

Catholic Education Fund

Student Aid Form • 2018 – 2019

• IMPORTANT: Print clearly and neatly with a ball point pen •

A PARENT, GUARDIAN or OTHER ADULT RESPONSIBLE FOR TUITION

Check one: Father Mother Stepfather Stepmother Other Adult

Last Name	First Name	MI
Social Security Number	Age	(Area Code) Home Phone
Address Apt. #	COUNTY OF RESIDENCE	
City	State	Zip
(Area Code) Work Phone	E-mail address	

Employed by _____ How Long? _____
 If you are self-employed, check this box and refer to Section K of this form.

B PARENT, GUARDIAN or OTHER ADULT RESIDING WITH PARENT A

Check one: Father Mother Stepfather Stepmother Other Adult

Last Name	First Name	MI
Social Security Number	Age	(Area Code) Home Phone
Address Apt. #	COUNTY OF RESIDENCE	
City	State	Zip
(Area Code) Work Phone	E-mail address	

Employed by _____ How Long? _____
 If you are self-employed, check this box and refer to Section K of this form.

C DEPENDENTS

Number of dependent children who will attend a tuition charging school: daycare, Pre-K, elementary school, secondary school, or college in the fall of 2018 _____.

Please list all dependent children in order of oldest to youngest, including college students. Indicate each dependent's relationship to Parent/Guardian A: child, foster child, grandchild, etc.

Dependent Last Name	Dependent First Name	MI	Age	Relationship to Parent/Guardian A	Name of school student plans to attend in the Fall of 2018	Grade in the fall of 2018	Applying for Aid? Yes/No	Amount we can pay toward tuition	Tuition charged yearly per student

Please check if additional dependents are listed on a separate sheet.

D HOUSEHOLD INFORMATION

1. Number of individuals who will reside in my/our household during the 2018-2019 school year:

Parents/Guardians _____ Children _____ Other* _____

*If **other**, please explain relationship to Parent _____

2. **Current marital status/housing arrangement of Parent/Guardian A:**

- a. Single, never Married* d. Divorced* g. Residing w/Significant Other
- b. Married e. Remarried* h. Other:
- c. Widowed f. Separated*

*If **Divorced, Remarried, Separated or Single**, please complete **Section E**.

E SINGLE, DIVORCED, REMARRIED, OR SEPARATED PARENTS

(TO BE COMPLETED BY PARENT OR GUARDIAN LISTED IN SECTION A)

1. Date of separation (Month/Year) _____

2. Date of divorce (Month/Year) _____

3. Non-custodial parent _____

4. Do you receive or pay child support? Receive \$ _____ per year Pay \$ _____ per year Neither

5. Who claimed student as a tax dependent in **2017**? _____

6. Who is responsible for the tuition for the dependent(s) listed in Section C? _____

Father % _____ Name _____

Mother % _____ Name _____

Other % _____ Name * _____

F TAXABLE INCOME - The 2017 federal tax return for student's household was:

Filed
 Not filed yet (See **Required Documentation** section)
 I/We do not file. I/We only receive non-taxable income

	Actual 2017	Estimate 2018
1. Total number of exemptions claimed on Federal Income Tax form:	_____	_____
2. Parent/Guardian A total taxable income from W-2 wages. (Total income for Parent A only)	\$ _____	\$ _____
3. Parent/Guardian B total taxable income from W-2 wages. (Total income for Parent B only)	\$ _____	\$ _____
4. Net business income* from self-employment, farm, rentals, and other businesses. (*Go to Section K) (Attach Schedules C, E, and/or F from your IRS 1040) See 2017 1040 lines 12, 17, and 18	\$ _____	\$ _____
5. Other non-work taxable income from interest, dividends, alimony, unemployment, and non-business income. See 2017 1040 lines 8a, 9a-11, 13, 14, 15b, 16b, 19-21 See 2012 1040 A lines 8a-14b	\$ _____	\$ _____
6. Allowable "Adjustments to Income" as reported on your IRS 1040, 1040A, or 1040EZ. See 2017 1040 line 36 or 1040 A line 20	\$ _____	\$ _____
7. Total "Adjusted Gross Income" as reported on your IRS 1040, 1040A, or 1040EZ. See 2017 1040 line 37 or 1040 A line 21	\$ _____	\$ _____
8. Total Tax Paid as reported on your IRS 1040, 1040A or 1040EZ. See 2017 1040 line 60 or 1040 A line 37	\$ _____	\$ _____
9. Medical/Dental expenses as reported on Schedule A line 1 of your IRS 1040 Form.	\$ _____	\$ _____

G NON-TAXABLE INCOME

List the **total amount** received from **1/1/17-12/31/17** for all recipients in household.
DO NOT list monthly amounts.

10. Child support	\$ _____ per year
11. Cash Assistance (TANF)	\$ _____ per year
12. Food Stamps	\$ _____ per year
a. Medicaid received in 2017? <input type="checkbox"/> Yes <input type="checkbox"/> No	
13. Social Security income (SSA/SSD, etc.) (Provide documentation for all recipients in household.)	\$ _____ per year
a. Social Security income (SSI ONLY) total received in 2017 * (Provide documentation for all recipients in household.)	\$ _____ per year
14. Student loans and/or grants received for PARENT's education. (Not college attending dependents or students listed in Section C.)	
a. total received in 2017	\$ _____ per year
b. total used for household expenses	\$ _____ per year
15. Housing Assistance (Sec. 8, HUD, etc.)	\$ _____ per year
a. Religious Housing Assistance total received in 2017 (parsonage, manse, etc.)	\$ _____ per year
16. Other non-taxable income (Workers' Comp., Disability, Pension/Retirement, etc. Identify source(s) in Section L)	\$ _____ per year
17. Loans/Gifts from friends or relatives	\$ _____ per year
18. Personal Savings/Investment Accounts used for household expenses (Do not include totals listed in Section I)	\$ _____ per year
19. Total non-taxable income for 2017	\$ _____ per year

H HOUSING INFORMATION

20. Do you rent or own your residence? Rent Own (go to line 22)

21. If renting, what is the monthly rental payment?

\$ _____

a. Amount paid by household

\$ _____ per month

b. Amount paid by other source(s)

\$ _____ per month

22. If you own your residence:

a. What is the current market value?

\$ _____

b. What is the amount still owed, including home equity loans?

\$ _____

c. What is the monthly mortgage payment?

\$ _____ per month

I ASSETS & INVESTMENTS (AS OF 12/31/17)

23. Total amount in cash, checking, and savings accounts

\$ _____

24. Total value of money market funds, mutual funds, stocks, bonds, CDs, or other securities

\$ _____

25. Total value of IRA, Keogh, 401K, SEP or other retirement accounts

\$ _____

26. If you own real estate other than your primary residence,

a. What is the fair market value?

\$ _____

b. What is the amount still owed?

\$ _____

27. Do you own a business? Yes No If **Yes**, please go to **Section K**.

a. What is the fair market value of your business?

\$ _____

b. What is the amount still owed?

\$ _____

28. Do you own a farm? Yes No If **Yes**, please go to **Section K**.

a. What is the fair market value of your farm?

\$ _____

b. What is the amount still owed?

\$ _____

J UNUSUAL CIRCUMSTANCES

Check all that apply to your situation within the past 12 months:

- Loss of job Death in the family Recent separation/divorce Shared custody Change in family living status
 High debt Change in work status Child support reduction Bankruptcy Medical/Dental expenses
 College expenses Shared tuition Income reduction Illness or injury Other (Explain lines below)

Parent/Guardian A: _____
Print Name

SS#: _____

K

Business Income Estimate (2017 Totals)

(If you have not filed your 2017 Tax Return, and are Self-Employed, own a business, rental property, and/or farm - DO NOT LEAVE BLANK)

	Schedule C	Schedule E	Schedule F
1. What is your total estimated GROSS business taxable income?	\$ _____	\$ _____	\$ _____
2. What is your total NET business taxable income/loss? (DO NOT LEAVE BLANK)	\$ _____	\$ _____	\$ _____
3. If your business pays your home rent or mortgage, what is the annual total?		\$ _____	
4. If your business pays for your personal automobile, what is the annual total?		\$ _____	
5. If your business pays any portion of other personal expenses, list total amount and explain in Section L.		\$ _____	
6. If you own rental property: What was the total amount of Rental Income received?		\$ _____	

L

Documentation Requirements

A complete photocopy of your **2017** Form 1040, 1040A, or 1040EZ (as filed with the IRS, including all Schedules). **2017** W-2 Forms, **2017** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s).

If you have not filed the current year tax return please provide a copy of your last return.

Make a copy of the form for your files and mail a copy to:

**SS. Simon and Jude Catholic Education Fund
8 Cavanaugh Court
West Chester, PA. 19382**

Please contact Ron Avellino (ron@simonandjude.org or 610-696-3624) if you have any questions.

Parent / Guardian A _____

Date: _____

Parent / Guardian B _____

Date: _____