Tucker Maxon School Financial Aid Application

2023-24 School Year
DEADLINE: APRIL 19, 2023 at 5 PM

Applications submitted by March 9, 2023 will be reviewed for early decision.

WHAT IS REQUIRED TO PROCESS THIS APPLICATION

(If any of the following is missing, your application will be considered incomplete and will not be considered)

- 1. This application form filled out in its entirety, signed and dated below by the Parent(s)/Guardian(s) listed in Sections A and B.
- 2. **If you have filed a 2022 IRS Form 1040:** Please provide a complete copy of your 2022 Form 1040, 1040A, or 1040EZ (as filed with the IRS, including all Schedules) and 2022 W-2 Forms, 2022 1099/1099R, or 1098 Forms for any wage-earning adult residing with or responsible for the student applicant(s).
- 3. **If you have not filed a 2022 IRS Form 1040:** Please provide a complete copy of your draft 2022 Form 1040, 1040A, or 1040EZ (as filed with the IRS, including all Schedules) and 2022 W-2 Forms, 2022 1099/1099R, or 1098 Forms for any wage-earning adult residing with or responsible for the student applicant(s).
- 4. If this application is submitted after April 19, 2023 deadline, and you are not including tax documents, you must provide a copy of your 2022 Extension for Filing Request.
- 5. **If you do not file an IRS Form 1040 AND/OR receive non-taxable income**: Please provide copies of all your 2022 year-end Social Services statements, Food Stamp documentation, Housing Assistance documentation, Student Loans and/or grant documentation for all parent's or guardian's education, Social Security income statements showing total amounts received in 2022 for all members of the household.
- 6. Please provide a copy of the **Personal Balance Sheet** at the end of this application for the entire household. This is required for all applications.

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Student: Grade: (next school year) Student: _____ Grade: ____ (next school year) Student: _____ Grade: ____ (next school year) Section A: Parent, Guardian, or Other Adult Responsible for Tuition (For purposes of this application, the term parent is based on the Free Application for Federal Student Aid (FAFSA) form. It includes custodial parents, ex-spouses and step-parents.) Check One: __ Father __ Mother __ Step-Father __ Step-Mother __ Other Adult First Name: _____ Middle Initial: _____ Last Name: _____ Social Security Number: Age: Phone: Address: City: _____ State: ____ Zip Code: _____ Work Phone: Email: Additional Parent, Guardian, or Other Adult Responsible for Student Check One: Father Mother Step-Father Step-Mother Other Adult First Name: Middle Initial: Last Name: Social Security Number: _____ Age: ____ Phone: _____ Address: City: State: Zip Code: Work Phone: _____ Email: _____

Section B: Dependents (Do Not Leave Blank)

	er of dependent children who value and the fall ary school, or college in the fall		nd a tuition charging school: presch 3?	nool, elementary school,
depen	dent's relationship to Parent/G	uardian	oldest to youngest, including colle A: child, foster child, grandchild, endent on your 2022 tax return.	_
1.	First Name:	MI	Last Name:	Age:
	Relation to Parent/Guardian in	n Sectio	n A:	
2.	First Name:	MI	Last Name:	Age:
	Relation to Parent/Guardian in	n Sectio	n A:	
3.	First Name:	MI	Last Name:	Age:
	Relation to Parent/Guardian in	n Sectio	n A:	
4.	First Name:	MI	Last Name:	Age:
	Relation to Parent/Guardian in	n Section	n A:	
5.	First Name:	MI	Last Name:	Age:
	Relation to Parent/Guardian in	n Section	n A:	
6.	First Name:	MI	_Last Name:	Age:
	Relation to Parent/Guardian in	n Section	n A:	
7.	First Name:	MI	_Last Name:	Age:
	Relation to Parent/Guardian in	n Sectio	n A:	

Section C: Household Information

1.	Number of individuals who will reside in my/our household during	the 2023-2	24 school year.
	Parents/Guardians Children Other (If other plea	ase explain	below)
2.	Who claimed student as a tax dependent in 2022		
3.	What adults are responsible for the tuition for the dependent(s) li Please check all that apply.	sted in Sect	ion C?
	Father % Name:		
	Mother % Name:		
	Other % Name:		
Section	n D: Non-Taxable Income		
Please	list the total amount received from 1/1/22-12/31/22 for all recipie	nts in the h	ousehold.
	list the total amount per year. Do not list monthly amounts here.		
			(-
	Child support		(Total in 2022)
	Alimony/Spousal support		(Total in 2022)
	Cash Assistance		(Total in 2022)
	Food Stamps and/or WIC		(Total in 2022)
	Medicaid received in 2022		No
6.	Social Security income (SSA/SSD, SSI, etc.)	\$	(Total in 2022)
	(Provide documentation for all recipients in household.)		
	Student loans and/or grants received for PARENT's education		(Total in 2022)
	Total amount of loans and/or grants used for household expenses		
9.	Housing Assistance (Sec. 8, HUD, etc.)	\$	(Total in 2022)
10.	Other non-taxable income (working for cash, adoption		
	and/or foster subsidy, worker's comp, disability, pension,		
	retirement, etc. Identify sources below.		(Total in 2022)
11.	Any Military/VA Benefits and/or Compensation.	\$	(Total in 2022)
	Identify sources below.		
	Sources of other non-taxable income:		
12.	Loan or gifts from relatives		(Total in 2022)
	Total non-taxable income for 2022 (items 1-12 above)	\$	(Total in 2022)

Section E: Housing Information

Do you	u rent or own your residence?
If you	rent:
•	What is your total monthly rental payment? per month
	Amount paid by parents or guardians listed in this application? per month
	Amount paid by other source(s) per month
	Are you current on your monthly payment? (yes or no)
	If no, what is the total amount you owe (behind in payments)?
If you	own:
ii you	1. What is the current market value of the home?
	2. What is the amount still owed?
	3. What amount is paid by other sources?
	4. What is your monthly mortgage payment?
	5. Are you currently behind on your monthly mortgage payment?
	6. If yes, what is the total amount owed (behind in payments)?
	7. Are you in a foreclosure process on your home? (yes or no)
Sectio	n F: Assets and Investments (current values)
1.	Total amount in all cash, checking, and savings accounts
2.	Total value of money market funds, mutual funds, stocks
	Bonds, CDs, or other securities
3.	Total value of IRA, KEOGH, 401K, 403B, SEP, or other retirement accounts
4.	Total contribution to your retirement account(s) in 2022
5.	Do you own real estate other than your primary residence? (yes or no)
	What is the current market value?
	What is still owed on the property?
6.	Do you own a business?
	What is the fair market value of your business?
	What is the amount still owed on your business or business loans?
7.	Do you own a farm?
	What is the fair market value of your farm?
	What is the amount still owed on your farm?

Section	n G: Special Circumstances (Please circle all that apply to your situation since September 1, 2022)
Loss of	job	Illness or injury
Recent	separation/divorce	Death in the family
Change	e in family living status	Shared custody
Change	e in work status	High debt
Bankru	ptcy	Child support reduction
College	e Expenses	Medical/Dental expenses
Incom	e reduction	Shared tuition
Please	explain financial impact:	
	·	
*Pleas	e attach an ontional letter e	xplaining any special circumstances if you need more space.
		Aprailining arry appealar emealmeter reces in you need into a space.
	n H: Business Income Estima	
•		turn and are Self-Employed, own a business, rental property, and/or farm
piease	Till out this section. Do not i	eave blank if you have business income.
1.	What is your total estimate	ed GROSS business taxable income?
	Schedule C Sche	edule D Schedule F
2	What is your total NET busi	noss tavable income /less?
۷.	What is your total NET busi	nedule D Schedule F
3.	If your business pays your h	nome rent or mortgage, what is the annual total?
4.	If your business pays for yo	ur personal automobile, what is the annual total?
5.	If your business pays any p	ortion of other personal expenses, list total amount and explain below:
6.	If you own rental property:	What was the total amount of Rental Income received?

my/our knowledge. I/We authorize Tucker Maxon School to use this do	cument and all the attachments for
financial aid request only. I/We agree to apply for the AG Bell, Travelers	Protective Association (TPA) and other
applicable scholarships by their deadlines.	
Parent/Guardian A:	_ Date:

SIGN HERE: I/We declare that the information on this form is true, correct and complete to the best of

Parent/Guardian B: ______ Date: _____

Name(s) Personal Balance Sheet Date

Assets		
Cash & Cash Equivalents		
Cash on hand		
Checking accounts		
Savings accounts		
Money markets		
Certificates of Deposit		
Other		
Total Cash & Cash Equivalents	\$	-
Brokerage Accounts		
Stocks		
Mutual funds		
Municipal bonds		
Government bonds		
Corporate bonds		
Other 1		
Other 2		
Total Brokerage Accounts	\$	-
Retirement Accounts		
401(k)		
403(b)		
457		
IRA - Roth		
IRA - Traditional		
Profit Sharing		
Pension		
Total Retirement Accounts	\$	-
Property		
Primary residence		
Secondary residence		
Rental property		
Rental property		
Investment property		
Vehicle 1		
Vehicle 2		
Recreational vehicle 1		
Recreational vehicle 2		
Total Property	Ś	_
Total Froperty	· ·	
Other Assets		
Loans to friends/family		
Life insurance cash surrender value		
Jewelry		
Furnishings		
Antiques		
Collectables		
Other 1		
Other 2		
Total Other Assets	\$	
Total Other Assets	Ą	-
Total Assets	\$	
Total Assets	7	-

Liabil	ities	
Short-Term Credit		
Credit card 1		
Credit card 2		
Credit card 3		
Loans from friends/family		
Home line of credit		
Other		
Total Short-Term Credit	\$	-
Loans & Mortgages		
Primary residence		
Secondary residence		
Rental property		
Investment property		
Vehicle 1		
Vehicle 2		
Recreational vehicle 1		
Recreational vehicle 2		
Student loans		
Business loans		
401(k) loan		
Total Loans & Mortgages	\$	-
Other Liabilities		
Commitment to donate		
Other 1		
Other 2		
Other 3		
Total Other Liabilities	\$	-
Total Liabilities	\$	_

Current Net Worth	\$ -

