

# RCS FINANCIAL AID APPLICATION 2016-2017

- **MUST BE RETURNED BY May 1, 2016 TO BE CONSIDERED**
- While we would like to be able to help everyone who applies, funds are very limited. No assistance is promised until official award letters are sent.
- RCS does not consider a student for Financial Aid until the completed enrollment packet is submitted and the registration fee is paid in full.

**INFORMATION PROVIDED ON THIS FORM WILL BE KEPT IN STRICT CONFIDENCE.**

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

### **Home Information:**

Dependents names/ages \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is this a single parent home? Yes \_\_\_\_\_ No \_\_\_\_\_

Name of head of household \_\_\_\_\_

Name of church attending \_\_\_\_\_

Do all of your school-age children attend RCS? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, please explain

\_\_\_\_\_

\_\_\_\_\_

Name of student (s)

Grade

Tuition

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TOTAL TUITION \_\_\_\_\_

**Other school fees:**

Activity/Technology Fee \_\_\_\_\_  
 Bus \_\_\_\_\_  
 Resource \_\_\_\_\_  
 Other \_\_\_\_\_  
 Total Bill \_\_\_\_\_

**Amount of tuition assistance requested** \_\_\_\_\_

**Financial Information:**

Father's place of employment \_\_\_\_\_

Monthly gross income (before taxes) \$ \_\_\_\_\_

Mother's place of employment \_\_\_\_\_

Monthly gross income (before taxes) \$ \_\_\_\_\_

Amount of child support received (if applicable) \$ \_\_\_\_\_

Other sources of income (please list with monthly amounts)

\_\_\_\_\_  
 \_\_\_\_\_

**Fixed monthly expenditures:**

	<u>MONTHLY</u>	<u>BALANCE</u>
Mortgage or Rent	\$ _____	\$ _____
Utilities:		
Electric	\$ _____	\$ _____
Gas	\$ _____	\$ _____
Cell Phone(s)	\$ _____	\$ _____
Home Phone	\$ _____	\$ _____
Water/Sewage Trash	\$ _____	\$ _____
Food – Groceries	\$ _____	\$ _____
Food – Eating Out	\$ _____	\$ _____



**Miscellaneous**

_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
<b>TOTALS</b>	<b>\$ _____</b>	<b>\$ _____</b>

**Please include the following with your application:**

- Copy of your 2015 Federal Tax Return
- A one page (maximum) memo explaining your reasons/situation for requesting financial aid.
- 3 months of current pay stubs

**This form must be entirely completed in or to be considered.**

**All application forms and registration fee must be submitted in order to be considered.**

**Submitted by:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_