

Student Name: _____ Grade: _____



La Salle Academy Financial Aid Application and Contract 2020 - 2021

Mission Statement

whose life opportunities are limited by financial, academic, social or emotional challenges, and whose parents/guardians desire, but cannot afford a Catholic education.

We are for parents or guardians who desire, but cannot afford, a Catholic Education for their child(ren).

Ideals in Action

1. Skillful Teachers
2. High Standards
3. Whole-hearted involvement of every child, teacher, parent, guardian, Board Member and Benefactor.

Financial Information

The reality is that there is a high cost to educate a LSA student with our unique model containing an Extended Day, Extended Year, a Social Worker and a Nurse Practitioner.

Cost to Educate Each Student	\$18,170.00
Tuition	\$15,750.00
Financial Aid Secured for Each	\$15,500.00
Cost per Student	<u>\$250.00</u>
Financial Aid Secured for Each	\$15,500.00

We have high expectations for you and your children.

We expect:

- **That your child be on time and come to school every day**
That your child work to follow our LSA 5 Goals
- **That children do their school work and homework to the best of their ability**
- **That a parent or guardian attend a mandatory parent / guardian meeting in August or September in order for your child/ children to attend La Salle Academy for the 2020-2021 school year.**

Parent/Guardian Signature

Date



La Salle Academy
PHILADELPHIA

**Application for La Salle Academy Registration &
Financial Assistance Grants 2020-2021**

A - STUDENT INFORMATION

Student's Name: _____ Grade _____ in September 2020
Date of Birth: _____ Social Security Number: _____
Child's Religion: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone Number: _____ Cell Phone Number: _____
Public School Assigned to: _____

B - PARENTS and GUARDIANS

Mother/Guardian's Name: _____ Father/Guardian's Name: _____
Social Security Number: _____ Social Security Number: _____
Occupation: _____ Occupation: _____
Employer: _____ Employer: _____
Cell Phone Number: _____ Cell Phone Number: _____
Email: _____ Email: _____

C - CURRENT MARITAL STATUS/HOUSING ARRANGEMENT OF PARENT/GUARDIAN:

_____ Single, never Married* _____ Divorced* _____ Residing w/Significant other
_____ Married _____ Remarried* _____ Other: _____
_____ Widowed _____ Separated*

D - HOUSEHOLD INFORMATION

Do you own _____ or rent? _____ reside with other _____

Number of individuals who reside in my/our household: _____

Parents/Guardians: _____; Children: _____; Other Adults: _____

Children:

Name	Age	Grade	School
a. _____	_____	_____	_____
b. _____	_____	_____	_____

Other Adults:

Name: _____ Relation to Child: _____

Name: _____ Relation to Child: _____

E - PLEASE LIST ALL FAMILY INCOME BY NET DOLLAR AMOUNT (TAKE HOME PAY) RECEIVED YEARLY:

Work: \$ _____ Child Support: \$ _____ Public Assistance: \$ _____
Pension: \$ _____ Social Security: \$ _____ Unemployment: \$ _____
Disability: \$ _____ Food Stamps: \$ _____ Other: \$ _____

F - UNUSUAL CIRCUMSTANCES

Check all that apply to your situation within the last 12 months.

- | | |
|---|--|
| <input type="checkbox"/> Loss of job | <input type="checkbox"/> Death in the family |
| <input type="checkbox"/> Recent separation/divorce | <input type="checkbox"/> Shared custody |
| <input type="checkbox"/> Change in family living status | <input type="checkbox"/> Child support reduction |
| <input type="checkbox"/> Change in work status | <input type="checkbox"/> Medical/Dental expenses |
| <input type="checkbox"/> High School/College expenses | <input type="checkbox"/> Shared tuition |
| <input type="checkbox"/> Income Reduction | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Illness or injury | _____ |
| | _____ |

I certify that to the best of my knowledge all the information on this form is correct and all the necessary proofs of income are attached.

Signature of Parent/Guardian: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

The LaSalle Academy Board and Benefactors work to raise monies for student scholarships.

Tuition	\$15,750.00
Families Responsibilities	\$ 250.00
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Scholarship Requested	\$15,500.00