

Financial Aid Application

Thank you for considering Mass Audubon Preschool. If you would like to apply for financial aid, please fill out the following form and send it to the appropriate Mass Audubon preschool. A list of Mass Audubon preschools is available at massaudubon.org/preschool.

Preschooler Name	Birth Date	
Parent/Guardian's Name(s)		
Relationship to Preschooler		
Address		
City	State	Zip
l PhoneDay Phone		
Email Address		
Mass Audubon Preschool:		
Family/Guardian Income		
	es, salary, tips, interest & dividends,	
compensation, social security	benefits, etc.	
Family/Guardian Contribution		
To support as many students as possi tuition fee.	ible, we ask families/guardians to c	ontribute a portion of the
We can contribute \$ p	er student, per month.	

Additional Information Regarding Financial Need

Are there special circumstances you would like us to consider? You may include information regarding medical expenses, school expenses, childcare expenses eldercare expenses, unemployment, etc. Attach additional pages if necessary.

Income Verification

Financial aid will be applied to your transaction once income verification is provided.

We ask that you include a copy of the **first page** of your most recent federal income tax return to this document and mail or deliver it to the sanctuary. If a tax return is not available, you may include copies of W-2 forms, end-of-year pay stubs, or letters detailing Social Security benefits, unemployment compensation, child support, or other income.

Signature Required

I certify that, to the best of my knowledge, the information I have provided on this application is truthful, accurate, and complete.

Signature	gnatureDate _	
	Office Use Onl	у
Date Received	Amount Awarded \$	Date of Notification
Date of Acceptance	Family Contribution \$	Final Payment Received