



# ST. DAVID'S

## EPISCOPAL DAY SCHOOL

### Tuition Assistance Application

Tuition assistance is available to those families that may not otherwise be able to afford private school or for those that are experiencing temporary hardships. It is awarded based on family size, income and special circumstances. St. David's Episcopal Day School is committed to helping those that want their children to experience high quality education with a Christian foundation at our school but may not have the financial means to attend. If you are a family who meets this criteria, please complete this application which is due at the time of your admissions application. You must provide a copy of your most recent tax return along with this application.

#### Family Information

**Child's Full Name:** \_\_\_\_\_  
*First Middle Last Jr, III, etc.*

**Applying for admission in (please circle):**

Twos, Nursery School, Pre-Kindergarten, Transitional Kindergarten, Kindergarten, Morning Enrichment (T/TH, W)

**Do you plan on enrolling in any of the following (please circle):**

Before-care (8:00 a.m. – 9:00 a.m.), afternoon enrichment, or after-care (3:00 through 5:30)

**Date of birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Primary phone number:** \_\_\_\_\_  
*Month Date Year*

**Home address:** \_\_\_\_\_  
*Street City State Zip*

**Status of parents (please circle):**

Married Separated Divorced Single Deceased

**Child lives with:** \_\_\_\_\_

	Parent/guardian #1	Parent/guardian #2
Name		
Employer		
Position		
How long employed		
Work phone #		
Annual income (before taxes)		
Addition income & source		
Savings account balance		
Monthly housing payment		
Do you rent or own?		
Number of dependent children		
Ages of dependent children		

**Outstanding Debts**

**Please list any outstanding debts (bank, credit or other), balance due, and monthly payment.**

Debt	Balance Due	Monthly Payment

### Other Aid Sources

Are you receiving any of the following sources of financial aid (please check)?

Aid	No	Yes	If yes, how much?
Food stamps			
Subsidized housing			
Loans/income from family and/or friends			

### Expenses

Monthly expenses exclusive of rent/mortgage, utilities and food.

Item	Amount

### Hardships

Briefly explain your family's circumstances that affect your income or your ability to pay tuition during this upcoming year:

---

---

---

---

---

---

What portion of tuition are you requesting for consideration? Please enter a specific amount.

---

### Signatures

**By the signatures below, I/we attest that the information provided in this application is accurate, complete, and current. I also understand that this is for use by the Tuition Assistance Committee only and that all responses are kept confidential.**

---

Parent/guardian #1 signature Date

---

Parent/guardian #2 signature Date

**Reminder: Please include a copy your most recent income tax return with this application.**

**Please mail this application to:**

St. David's Episcopal Day School  
ATTN: Tuition Assistance Committee  
765 S. Valley Forge Rd.  
Wayne, PA 19087

**St. David's Episcopal Day School does not discriminate in the administration of educational programs, admission, financial aid, or employment practices on the basis of race, color, sex, age, religion, marital status, socio-economic status, disability, ethnic or national origin, sexual orientation, or citizenship.**

