



## 2024-2025 Financial Aid Request

### Overview

Independent school education is a choice, which many families make significant financial sacrifices to support. The Perkins School is committed to educating a socio-economically diverse student body. Our financial aid process is designed to help us achieve this goal as fairly as possible. In an effort to ensure the equitable and consistent distribution of financial aid, The Perkins School uses the suggested guidelines for best practices as outlined by the National Association of Independent Schools (NAIS).

Each year we allocate approximately 15% of tuition for financial aid. Financial aid awards are grants that will cover a portion of tuition for the specified academic year and do not require repayment. Once financial aid is provided, a similar amount will continue to be provided annually unless there are significant changes to the family's finances.

### Submission Requirements due February 1, 2024

1. Copy of your 2023 IRS tax forms (or your 2022 IRS tax return until the 2023 return is completed)
2. This Financial Aid Request (along with accompanying statement explaining your needs)
3. This Financial Aid Application (pages 2 and 3)
4. Completion of either one of the following but only IF you are completing such for another school:  
School & Student Services online: <https://sssynais.force.com/familyportal/>  
FACTS financial statement online: <https://online.factsmgt.com/Signin.aspx>
5. Please call (206-526-8217) or email ([angie@theperkinsschool.org](mailto:angie@theperkinsschool.org)) with any questions.

1. Student's Name: \_\_\_\_\_  
(Please print student's name)

2. Will the student attend our Extended Day Program (after-school care) most days?  YES  NO

- Our Extended Day Program (EDP) is available every school day until 6:00 p.m.
- The annual discounted fee for students who are enrolled full-time in EDP is \$3,750. (\*)
- This includes school closures for mid-winter and spring breaks, and parent/teacher conferences.
- If preferred, there is a daily drop-in option of \$25 (\$65 for breaks and conference days) for periodic attendance. (\*)

(\*) Fees are subject to change in spring, 2024

3. I estimate that I am able to pay an annual amount of \$ \_\_\_\_\_  YES  NO

4. Does the amount you recorded include the \$3,750 for full-time enrollment in EDP (after-school care)?  YES  NO

5. **We encourage you to share your situation by email or on a separate paper** so that the financial aid committee comes to understand your Request better. We ask that you also explain any changes, updates, or special circumstances which occurred in 2023 and/or is expected to occur in 2024 that affect the family's finances.

I understand I must return this request to the Perkins School by February 1, 2024 to be eligible for financial aid consideration. Should I accept financial aid and enroll my child, I agree to provide Perkins with a copy of appropriate 2023 tax return forms at the time such is submitted to the IRS, or by October 15, 2024, whichever comes first.

\_\_\_\_\_  
Parent or Guardian (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**2024-2025 FINANCIAL AID APPLICATION**

**CREDIT CARDS**

Credit Card Company	Current Balance	Monthly Payment

**MORTGAGE COMPANY**

Mortgage Company	Assessor's Value	Balance	Monthly Payment

**AUTO LOANS**

Auto Make & Model	Financed By	Balance	Monthly Payment

**OTHER LOANS, DEBTS, OR OBLIGATIONS**

Description	Financed By	Balance	Monthly Payment

**OTHER SOURCES OF INCOME**

Description	Amt. per month or value

**OTHER ASSETS**

Description	Value

I authorize **The Perkins School** to verify the information provided on this form.

Signature of applicant	Date
Signature of co-applicant	Date

**FINANCIAL AID APPLICATION****Household #1 or Parent #1 INFORMATION**

Name:		
Date of birth:	SSN:	Phone:
Current Address:		
City:	State:	ZIP Code:
Own Rent (Please circle)	Monthly payment or rent:	How long?
Previous Address:		
City:	State:	ZIP Code:
Owned Rented (Please circle)	Monthly payment or rent:	How long?

**EMPLOYMENT INFORMATION**

Current Employer:		
Employer Address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:
Previous employer:		
Address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:

**Household #2 or Parent #2 INFORMATION**

Name:		
Date of birth:	SSN:	Phone:
Current Address:		
City:	State:	ZIP Code:
Own Rent (Please circle)	Monthly payment or rent:	How long?
Previous Address:		
City:	State:	ZIP Code:
Owned Rented (Please circle)	Monthly payment or rent:	How long?

**EMPLOYMENT INFORMATION**

Current Employer:		
Employer Address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:
Previous employer:		
Address:		
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income: