

# WESTGATE CHRISTIAN ACADEMY

90 Oak Street, Natick, MA 01760

## FINANCIAL AID FORM

**This form must be returned with application or enrollment form.**  
***Your personal and financial data will be treated with care and confidentiality***

**Name(s) of child (children) whose application(s) relate(s) to this Financial Aid Form:**

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**Please complete and return:**

- (1) This Financial Aid Form
- (2) A copy of your most recently filed Federal and State Income Tax Returns

**Instructions:**

**Section A: Parent or Guardian Information**

Provide for parents or guardians living in the home all of the information requested. If there are more than two (for example, if a grandparent lives in the home and contributes to education), explain the circumstances in Section F. Be sure to answer the questions regarding divorced or separated parents.

**Section B & C: Household Information & Information about Dependents**

Provide the information requested regarding the family home and number of persons that reside in the family home. Include children living at college if they do not maintain a separate residence, rely on the adults listed in Section A for their primary support, and maintain living space in the family home. Print the full name and date of birth of each child. Provide the school name, grade, and tuition amount (to the best of your knowledge) for any of the children who attend a tuition-charging school, college, preschool, or day care facility. Include any additional amounts paid for the child's daycare in the tuition column.

**Section D: Income and Expenses**

Complete each line, entering zero if applicable. Omit cents (for example, report \$1234.56 as \$1235). Provide calendar year information corresponding to the tax form year for each adult listed in Section A. If there are two parents listed and separate tax returns were filed, add the amounts from each tax return to determine the appropriate response and submit copies of both tax returns with this application. Be sure to read the specific instructions for each line contained in this section.

**Section E: Assets and Liabilities**

Complete each line, entering zero if applicable. Omit cents as indicated in Section D. Provide the current fair value of the assets and liabilities owned by all financially responsible adults listed in Section A. Please be sure to read the specific instructions for each line.

**Section F: Special Circumstances**

If you expect to incur or have incurred any significant financial changes which would affect the relevance of the information provided on the application (such as job loss, promotion, etc.), or have other relevant circumstances (such as a grandparent that contributes to education), explain the circumstances here.

**Section G: Certification and Signature**

All of the parents listed in Section A must provide a printed name, signature, and the date that the form was completed. Incomplete or unsigned applications will not be processed.

## Section A - Parent or Guardian Information

Include all parents or guardians who reside in the family home

Please check one:  Mother  Stepmother  Guardian

Please check one:  Father  Stepfather  Guardian

\_\_\_\_\_  
First Name                      MI                      Last Name

\_\_\_\_\_  
First Name                      MI                      Last Name

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Social Security Number                      Age

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Social Security Number                      Age

\_\_\_\_\_  
Occupation                      Work Phone

\_\_\_\_\_  
Occupation                      Work Phone

\_\_\_\_\_  
Employer (please note if self employed)                      # Years

\_\_\_\_\_  
Employer (please note if self employed)                      # Years

Marital status:  Single  Married  Separated  
 Divorced  Widowed

Marital status:  Single  Married  Separated  
 Divorced  Widowed

## Section B - Household Information

Street Address: \_\_\_\_\_ Apt. #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Did you receive a scholarship award from Westgate Christian Academy for the academic year before the year of this application?  Yes  No

Are you applying and/ or will you receive aid from other sources?  Yes  No If yes, please list source(s) and probable amounts \_\_\_\_\_

## Section C - Information About Dependents

**Include all dependents residing in the family home who rely on the adults in Section A for their primary support.**

Please list **all** dependents, from oldest to youngest, including non-school age dependents. Tuition \$ should be NET of scholarships expected. Include daycare costs or other tuition in the Tuition \$ space. *Attach additional sheets if necessary.*

**Spaces below for  
academic year  
of application**

**Oldest:**

First & Last Name		Date of birth		Grade	
School name		School city		Tuition \$	

**Next oldest:**

First & Last Name		Date of birth		Grade	
School name		School city		Tuition \$	

**Next oldest:**

First & Last Name		Date of birth		Grade	
School name		School city		Tuition \$	

**Next oldest:**

First & Last Name		Date of birth		Grade	
School name		School city		Tuition \$	

**Next oldest:**

First & Last Name		Date of birth		Grade	
School name		School city		Tuition \$	