## **Tuition Assistance Application**

Tuition assistance is awarded each year on the basis of demonstrated need in keeping with our tuition assistance guidelines. A portion of our annual operating budget is allocated to tuition assistance, benefiting approximately 10% of our student body in any given year.

- You do not need to leave a deposit if you are applying for assistance. Once a decision has been made regarding your request, your balance will be due. Monthly payment plans are negotiable. *There are no full scholarships*.
- Please complete the form and attach supporting income documentation. You must submit the form and documentation together, as your request will not be processed until it is complete.
- Please make sure to **complete the entire application form**.
- You may drop off your application at the front desk, or mail to:

Greenwich House Youth Community Center 27 Barrow Street NY, NY 10014

• Decisions are made on a rolling basis. Please submit your tuition assistance request as soon as possible. You will be notified by mail.

## We require the following income documents:

- □ Most recent tax returns
- □ **W2s** (*Please only give the last four digits of you social security information*)
- □ Last 3 paystubs
- □ Any additional documentation that supports your need for financial aid
- Please note: Parents who file taxes separately are expected to submit independent financial information, as well as divorced and/or separated parents.
- Because financial circumstances change, parents must reapply for tuition assistance each year.
- All tuition assistance applications and grant awards are entirely confidential.

PLEASE ATTACH COPIES OF DOCUMENTS ONLY AS WE CANNOT RETURN INCOME DOCUMENTATION.

## GREENWICH HOUSE YOUTH COMMUNITY CENTER TUITION ASSISTANCE APPLICATION

Please fill out all fields in their entirety. Incomplete applications will not be processed.

Semester:	Program:				Date: _	
Name of Student(s):						
Parent's Name:				Single □  Married □  Divorced □  Separated □  Widowed □		
Email Address:						
Email Address:						
Street Address		Apt#	City		State	Zip Code
Cell / Home Number:		Work N	Number:			
Household Composit	tion: Please list all family members li	ving at h	ome.			
Name	Relationship to Studen	t		Age	Occup	ation
Household Expenses	: Please provide us with your monthl	y expens	es.			
Rent:	Or Mortgage:				.):	
Medical Expenses: Household Income: _ Monthly Net Wages: _	D 1/1.				•	
	GI/Pension/Unemployment: ng Child Support:					
	stenuating financial circumstance that lequately represented on this application		ld like the	Tuition Ass	sistance Con	nmittee to be

Date

Signature