

Ruth Murdoch Elementary School & PMC

Application for Financial Aid

Year \_\_\_\_\_

Rec. RMES \_\_\_\_\_

Date \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION:**

Please fill in the information about the parent(s)/guardian(s) that are financially and legally responsible for the student and with whom the student resides. (please print)

<b>FATHER's</b> Name _____ Guardian's Name _____ Guardian's Relationship _____ AU ID# _____ Street Address _____ Town/City _____ State _____ Zip Code _____ Home Phone _____ Occupation _____ Church Membership _____ Andrews University Student? ____ Full Time/Part Time Student: _____ If Yes, which school(s)? _____  Employed by _____ Full Time Employee __ Part-Time Employee Marital Status: _____  <i>If Parents of the student(s) are divorced or separated, please fill in the following information concerning the other parent.</i> Name _____ Street Address _____ Town/City _____ State _____ Zip Code _____ Home Phone ( ) _____ Occupation _____ Employer _____ Business Phone ( ) _____	<b>MOTHER's</b> Name _____ Guardian's Name _____ Guardian's Relationship _____ AU ID# _____ Street Address _____ Town/City _____ State _____ Zip Code _____ Home Phone _____ Occupation _____ Church Membership _____ Andrews University Student? _____ Full Time/ Part-Time Student _____ If Yes, which school(s)? _____  Employed by _____ Full Time Employee Part Time Employee Marital Status:  <i>If Parents of the student(s) are divorced or separated, please fill in the following information concerning the other parent.</i> Name _____ Street Address _____ Town/City _____ State _____ Zip Code _____ Home Phone ( ) _____ Occupation _____ Employer _____ Business Phone ( ) _____
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**IMPORTANT NOTE: Please include a photocopy of your previous year's U.S. and State Income Tax Forms with W2's or equivalent papers. Financial aid will NOT BE CONSIDERED without these forms!**

**STUDENT INFORMATION: (please print)**

<b>Student's Name</b> <i>(last, first, middle)</i>			
<b>AU ID #</b>			
<b>Birth Date</b>			
<b>Age</b>			
<b>Sex</b>			
<b>Grade Entering</b>			
<b>Country of Birth</b>			
<b>Country of Citizenship</b>			
<b>Student is Living with:</b>			
<b>Church Membership</b>			
<b>RMES Student Last year?</b>			
<b>Educational Resources- Dollar Amount</b> <i>(endowment, trusts, etc.)</i>			

<b>Brothers &amp; Sisters not attending RMES</b> <i>(Name)</i>	<b>Age</b>	<b>School Attending</b>	<b>School Cost for One Year</b>	<b>Amount paid by Parents</b>	<b>Student Aid Received</b>

**ASSETS OF PARENTS- WRITE "NONE" IN THE LINES BELOW IF IT IS NOT APPLICABLE**  
*(All lines must have a response!)*

	<b>Present Market Value</b>
Home (purchase price \$_____)	\$ _____
Investments (stocks, bonds, other securities)	\$ _____
Business (include your share of all business assets)	\$ _____
Other real estate (property, second home)	\$ _____
Cash, savings, checking accounts	\$ _____
Motorized Vehicle    make _____ model _____ year _____ (purchase price \$_____)	\$ _____
Motorized Vehicle    make _____ model _____ year _____ (purchase price \$_____)	\$ _____
Motorized Vehicle    make _____ model _____ year _____ (purchase price \$_____)	\$ _____
Trailer, Camper or Boat make _____ model _____ year _____ (purchase price \$_____)	\$ _____
Other Assets _____, _____, _____	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

MONTHLY INCOME		MONTHLY EXPENSES			
		Monthly Expenses	Original Amount	Balance Due	Monthly Payment
Wages		Home (mortgage or rent)	\$	\$	\$
Part-Time Work		Motorized Vehicles			
Social Security		Motorized Vehicles			
Pension		Trailers, Campers or Boats			
Child Support		Utilities			
Investments		Telephone			
Welfare Benefits		Insurance			
Food Stamps		Credit Cards			
Veterans Benefits		Medical			
Other Income		Food			
Educational Assist. (Grants, etc.)					
<b>TOTAL</b>	<b>\$</b>	<b>TOTAL</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

**PARENT/GUARDIAN:**

We would like to send our child/children to Ruth Murdoch Elementary if sufficient aid is available. We can sacrificially pay \$\_\_\_\_\_ for the school year of \_\_\_\_\_, with the first monthly payment of \$\_\_\_\_\_ to be paid at registration. We assume responsibility of the remaining portion of the bill after any student labor (if applicable) and aid are credited. We also understand that the remaining balance, after our initial payment and any other authorized charges, will be split into nine equal payments (September - May, unless alternative financial plans have been approved by the school).

We certify that all information in this application is true and correct to the best of our knowledge. **We further understand that forfeiture of financial aid will occur** if we **1)** do not make an annual request for aid with appropriate documentation **2)** maintain our monthly payment schedule **3)** demonstrate quarterly academic diligence and maintain average or above average grades **4)** uphold satisfactory attendance and citizenship and **5)** participate actively in any Home & School activities sponsored by the school.

If all criteria for the award are met, financial aid will be awarded equally ***into two credits?*** which should occur on the February and May statements. If a student leaves school prior to the conclusion of the school year, tuition, as well as financial aid, will be prorated on the number of days in attendance.

Any additional charges (Music, Extend-Ed, etc.) to a student's account may be restricted or forbidden if the account is not kept current.

***Financially Responsible Parent/Legal Guardian:***

\_\_\_\_\_ (Print Name)                      \_\_\_\_\_ (Sign Name)                      \_\_\_\_\_ (Date)

*Witness to Above Signature: relationship* \_\_\_\_\_

\_\_\_\_\_ (Print Name)                      \_\_\_\_\_ (Sign Name)                      \_\_\_\_\_ (Date)