



## APPLICANT AND FAMILY INFORMATION

### student applicant information

STUDENT A	last name	first name	m.i.
	date of birth {mm/dd/yy}	social security no.	sex <input type="checkbox"/> m <input type="checkbox"/> f
	grade student will enter in September 2019		
	student lives with <i>check all that apply</i> <input type="checkbox"/> father <input type="checkbox"/> mother <input type="checkbox"/> stepfather <input type="checkbox"/> stepmother <input type="checkbox"/> male guardian <input type="checkbox"/> female guardian		

STUDENT B	last name	first name	m.i.
	date of birth mm/dd/yy	social security no.	sex <input type="checkbox"/> m <input type="checkbox"/> f
	grade student will enter in September 2019		
	student lives with <i>check all that apply</i> <input type="checkbox"/> father <input type="checkbox"/> mother <input type="checkbox"/> stepfather <input type="checkbox"/> stepmother <input type="checkbox"/> male guardian <input type="checkbox"/> female guardian		

STUDENT C	last name	first name	m.i.
	date of birth mm/dd/yy	social security no.	sex <input type="checkbox"/> m <input type="checkbox"/> f
	grade student will enter in September 2019		
	student lives with <i>check all that apply</i> <input type="checkbox"/> father <input type="checkbox"/> mother <input type="checkbox"/> stepfather <input type="checkbox"/> stepmother <input type="checkbox"/> male guardian <input type="checkbox"/> female guardian		

### parent or guardian information

MAILING ADDRESS	Home address where all correspondence with be mailed.		
	number and street		
	city	state	zip code

PARENT A	name	age	<input type="checkbox"/> disabled	<input type="checkbox"/> deceased			
	address	zip code					
	relationship to student A	<input type="checkbox"/> father	<input type="checkbox"/> mother	<input type="checkbox"/> stepfather	<input type="checkbox"/> stepmother	<input type="checkbox"/> male guardian	<input type="checkbox"/> female guardian
	relationship to student B	<input type="checkbox"/> father	<input type="checkbox"/> mother	<input type="checkbox"/> stepfather	<input type="checkbox"/> stepmother	<input type="checkbox"/> male guardian	<input type="checkbox"/> female guardian
	relationship to student C	<input type="checkbox"/> father	<input type="checkbox"/> mother	<input type="checkbox"/> stepfather	<input type="checkbox"/> stepmother	<input type="checkbox"/> male guardian	<input type="checkbox"/> female guardian
	occupation	title					
employer	years with firm	<input type="checkbox"/> part time	<input type="checkbox"/> full time				

PARENT B	name	age	<input type="checkbox"/> disabled	<input type="checkbox"/> deceased			
	address	zip code					
	relationship to student A	<input type="checkbox"/> father	<input type="checkbox"/> mother	<input type="checkbox"/> stepfather	<input type="checkbox"/> stepmother	<input type="checkbox"/> male guardian	<input type="checkbox"/> female guardian
	relationship to student B	<input type="checkbox"/> father	<input type="checkbox"/> mother	<input type="checkbox"/> stepfather	<input type="checkbox"/> stepmother	<input type="checkbox"/> male guardian	<input type="checkbox"/> female guardian
	relationship to student C	<input type="checkbox"/> father	<input type="checkbox"/> mother	<input type="checkbox"/> stepfather	<input type="checkbox"/> stepmother	<input type="checkbox"/> male guardian	<input type="checkbox"/> female guardian
	occupation	title					
employer	years with firm	<input type="checkbox"/> part time	<input type="checkbox"/> full time				

parents' income and expense information

BASIC TAX INFORMATION	The information on this form is from a 2018 tax return that is <input type="checkbox"/> completed <input type="checkbox"/> estimated											
	Income tax filing status for:		2017	<input type="checkbox"/> single	<input type="checkbox"/> married, joint return	<input type="checkbox"/> married, filing separately	<input type="checkbox"/> head of household	<input type="checkbox"/> do not file				
			2018	<input type="checkbox"/> single	<input type="checkbox"/> married, joint return	<input type="checkbox"/> married, filing separately	<input type="checkbox"/> head of household	<input type="checkbox"/> do not file				
	Did the student applicant/s file a federal tax return for 2018						Student A	<input type="checkbox"/> yes <input type="checkbox"/> no	Student B	<input type="checkbox"/> yes <input type="checkbox"/> no	Student C	<input type="checkbox"/> yes <input type="checkbox"/> no
	How many federal income tax exemptions did you or will you claim for 2018											
	How many children, including the student applicant/s, are residing in your home, and/or are receiving support from you in 2018											
How many children entered in the last question will be attending full-time childcare, tuition-charging preschools, schools, or colleges in 2019/2020												

TOTAL TAXABLE INCOME BEFORE DEDUCTIONS			2016	2017	2018
	Salaries and wages for parent, stepparent, or guardian named in "Parent A"				\$
Salaries and wages for parent, stepparent, or guardian named in "Parent B"				\$	\$
Taxable dividends and/or interest income from 1099 statement(s)				\$	\$
Alimony received or estimated (do not include child support)				\$	\$
Net profit/loss from business and/or farm (if loss, use parentheses around figures)				\$	\$
Check one or both:		<input type="checkbox"/> parent, stepparent, or guardian named in "Parent A"			
		<input type="checkbox"/> parent, stepparent, or guardian named in "Parent B"			
Other taxable income (please explain on back)				\$	\$
Untaxed portion of payments to IRA				\$	\$
Keogh plan payments and self-employed SEP deduction				\$	\$
Other IRS allowable adjustments to taxable income				\$	\$

TOTAL NONTAXABLE INCOME	Child support received for all children			\$	\$
	Social security benefits for entire family			\$	\$
	Other nontaxable income			\$	\$
	IRS total itemized deductions from IRS schedule A		\$	\$	
	Total federal tax from line 61 on the 1040 form of year 2018		\$	\$	
	Self-employment tax paid		\$	\$	

INSURANCE & MEDICAL/ DENTAL EXPENSES	Total medical/dental expenses not reimbursed by insurance companies		\$	\$
	Total paid for medical/dental insurance plans		\$	\$
	Unusual expenses		\$	\$

family assets and debts

HOME OWNERSHIP	Home (if owned)	Year purchased	Total property insurance carried	Present market value	Unpaid principal on 1st mortgage	Annual payments on 1st mortgage	
		Purchase price \$	\$	\$	\$	\$	
	Do you have a second mortgage or equity loan on this home? <input type="checkbox"/> yes <input type="checkbox"/> no			Year of 2nd mortgage	Year of equity loan	Unpaid principal on 2nd mort/eq	Annual payments on 2nd mort/eq
						\$	\$
Enter the total amount of unpaid principal and annual payments on all mortgages and equity loans on your home					Unpaid principal on all mortgage & equity loan/s on your home	Annual payments on all mortgage & equity loan/s on your home	
					\$	\$	
All other real estate	Year purchased	Total property insurance carried	Present market value	Unpaid principal on all other real estate	Annual pmts on all other real estate		
	Purchase price \$	\$	\$	\$	\$		

OTHER ASSETS AND DEBTS	Bank accounts: total of parents' checking and savings (interest-bearing and non-interest bearing) accounts					\$
	Investments: net value (stocks, bonds, mutual funds, etc.)					
	Debts					\$
	Amount of Debts only to be paid during 2019					\$
Consumer debts					\$	

STUDENT ASSETS	Enter asset information only for student applicant/s listed in Section A						
		Student A		Student B		Student C	
	Cash, Savings, and Checking	2017 \$	2018 \$	2017 \$	2018 \$	2017 \$	2018 \$
	Investments	2017 \$	2018 \$	2017 \$	2018 \$	2017 \$	2018 \$
	Gifts	2017 \$	2018 \$	2017 \$	2018 \$	2017 \$	2018 \$
	Total value of all trusts	2017 \$	2018 \$	2017 \$	2018 \$	2017 \$	2018 \$
	Is any income or part principal from trust currently available? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no						
	Who established the trust for each student?						
Amounts available as contributions from other relatives or trusts	2017 \$	2018 \$	2017 \$	2018 \$	2017 \$	2018 \$	

SUPPLEMENTAL INFORMATION

student applicant information

How much can you afford for educational expenses for the 2019-2020 academic year for each student applicant?	Student A	Student B	Student C
	\$	\$	\$
How much can you afford for educational expenses for the 2019-2020 academic year for all students listed below as dependent children?	All students total	\$	
Have you applied or will you be applying for an educational loan? <input type="checkbox"/> yes <input type="checkbox"/> no (if no, please explain on back)			

Provide current year (2018-2019) information below for all dependent children. Enter first and last names. The number of dependent children should be the same as the number of children you entered as residing in your home (Section C). List student applicants first, in the same order as in Part I, A, B, and C. List all children, those applying for aid and those not applying for aid. (continue on back if necessary)

Full name	Name of present childcare, preschool, school, or college	Grade or year in school or college	Age	Cost of childcare preschool, school or college	Amount of this cost paid by Parent or guardian	Financial aid award	Loan	Students' assets & earnings	Friends, relatives & trust funds	Other sources
				\$	\$	\$	\$	\$	\$	\$
				\$	\$	\$	\$	\$	\$	\$
				\$	\$	\$	\$	\$	\$	\$
				\$	\$	\$	\$	\$	\$	\$
				\$	\$	\$	\$	\$	\$	\$

Provide next year (2019-2020) information below for all dependent children. Enter first and last names. The number of dependent children should be the same as the number of children you entered as residing in your home (Section C). List student applicants first, in the same order as in Part I, A, B, and C. List all children, those applying for aid and those not applying for aid. (continue on back if necessary)

Full name	Name of childcare preschool, school, or college to be attended in 2019-2020	Grade or year in school or college	Check appropriate boxes for 2019-2020					Dollar amount that will be available to cover school costs for academic year 2019-2020					
			Childcare	Public school	Private school	College	Applied for aid	From parents' / guardian	Financial aid award	Loan	Students' assets & earnings	Friends, relatives & trust funds	Other sources
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	\$	\$	\$	\$
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	\$	\$	\$	\$
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	\$	\$	\$	\$
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	\$	\$	\$	\$
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$	\$	\$	\$	\$	\$

If you do not own your home and rent your family residence, provide total amount of annual rent you paid for 2018 and what you estimate for 2019	2018	2019
	\$	\$
Is there an employee retirement plan for person listed as "Parent A?"	<input type="checkbox"/> yes <input type="checkbox"/> no	
Is there an employee retirement plan for person listed as "Parent B?"	<input type="checkbox"/> yes <input type="checkbox"/> no	
Total employment-related childcare expenses in 2018	\$	
Face value of parents' life insurance policies:		
	Single-premium life	\$
	Whole life	\$
	Term life	\$
	Universal life	\$
Annual cost of clubs requiring dues over \$250 in	\$	
Costs of camps and lessons in 2018-2019	\$	
Costs of vacations in 2018	\$	
Indicate student applicant/s earnings for calendar year	Student A	\$
	Student B	\$
	Student C	\$
List all family cars (if more than 3 cars are owned or leased, list additional cars on back)		
make and year	<input type="checkbox"/> own <input type="checkbox"/> lease <input type="checkbox"/> provided by employer/business	
make and year	<input type="checkbox"/> own <input type="checkbox"/> lease <input type="checkbox"/> provided by employer/business	
make and year	<input type="checkbox"/> own <input type="checkbox"/> lease <input type="checkbox"/> provided by employer/business	
Current total car debt \$	Annual Lease expense \$	
List all boats and other recreational vehicles owned or leased (if more than 3 vehicles are owned or leased, list additional vehicles on back)		
make and year		
make and year		
make and year	Current total recreational vehicle debt \$	

SUPPLEMENTAL INFORMATION continued

Complete this item only if student applicants' parents are separated, divorced, or have never been married.	
<input type="checkbox"/> Divorced <input type="checkbox"/> Separated, no court action <input type="checkbox"/> Legally separated <input type="checkbox"/> Never married	
Date of divorce or separation	
Noncustodial parent's full name	
Home address	Telephone
Occupation	Employed by
Student A	Name of parent who claimed student as a tax exemption (2018)
	Is there any agreement specifying a contribution for this student's educational expenses? <input type="checkbox"/> yes, \$ _____ per year <input type="checkbox"/> no
Student B	Name of parent who claimed student as a tax exemption (2018)
	Is there any agreement specifying a contribution for this student's educational expenses? <input type="checkbox"/> yes, \$ _____ per year <input type="checkbox"/> no
Student C	Name of parent who claimed student as a tax exemption (2018)
	Is there any agreement specifying a contribution for this student's educational expenses? <input type="checkbox"/> yes, \$ _____ per year <input type="checkbox"/> no

Use this space for explanations of any unusual circumstances, expenses, or as instructed throughout this form. Be as brief as possible.

PARENTS' CERTIFICATION AND AUTHORIZATION

We declare that the information reported on this form to the best of our knowledge and belief, is true, correct, and complete. We authorize its use by Sparhawk School. The School has our permission to verify the information reported. If asked by a school or agency, we agree to send an official copy of our latest income tax return and/or a signed IRS form 4506 directly to the school or agency. A signed IRS form 4506 will allow the school to request a copy of your federal tax return directly from the IRS.

PARENT A	Signature	Date
	Printed Name	
	Home Telephone	Work Telephone

PARENT B	Signature	Date
	Printed Name	
	Home Telephone	Work Telephone