



Supplementary Financial Information

Name of Student (s): _____ Grade for 2024-2025 _____

Name of Parent completing SFI: _____

New Student Returning Student
 First Time Applicant Renewal Applicant

1. Monthly Income Estimated 2024

Parent 1: Net Wages after taxes	
Parent 2: Net Wages after taxes	
Business Income	
Rental Income	
Alimony	
Child Support	
Disability/Unemployment	
Trusts/Gifts	
Other	
Total Estimated Monthly Income	

2. Monthly Expenses Estimated 2024

Mortgage/Rent	
Homeowner's/Rent Insurance	
Property Taxes	
Home Maintenance	
Auto Payments	
Auto Insurance	
Auto Maintenance	
Health/Life Insurance	
Utilities/Telephone	
Charity/Tithing	
Groceries/Household Supplies	
Savings/Retirement	
Gas/Transportation	
Credit Card Payments	
Other Expenses	
Total Estimated Monthly Expenses	

3. Other Financial Support

(Annual Amount)	
Source 1	
Source 2	
Source 3	

4. Credit Card Debt

Total Amount Owed on Credit Cards	
-----------------------------------	--

Please explain any special circumstances related to this credit card or debt card.



5. Children's Education, Activities & Care Estimated 2024

(Annual Amount)	
Tuition	
Preschool	
Daycare (applicant)	
Daycare (siblings)	
Summer Programs	
Tutoring	
Arts or Sports Programs	
Other	
Total:	

6. Self-Employment Estimated 2024

If Self-Employed	
Type of Business	
Percent Owned	
Home Based (Y/N)	

7. Divorced or Separated Parents

Please describe the financial arrangements that pertain to the education of your child(ren).

8. Family Circumstances

Has your family experienced any changes in its circumstances that adversely affect your ability to pay for your child(ren)'s tuition? Please describe.

Parent/Guardian Signature

Date