

**Keystone Montessori School
2010–2011**

Financial Aid Application

1025 E. Liberty Lane – Phoenix, AZ 85048 – Phone (480) 460-7312 – Fax (480) 283-8402

Please indicate which program you are applying for:

- Extracurricular Activity Fee (Needs Based)
- AZSTO Kindergarten (Needs Based)

Child/children applying for: 1. _____ 2. _____ 3. _____

Marital Status: Married Separated Divorced Single Widowed

Please check if this is child/children's primary address

Mother's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail Address _____

Mother's Occupation _____ Mother's Annual Income _____

Please check if this is child/children's primary address

Father's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail Address _____

Father's Occupation _____ Father's Annual Income _____

FINANCIAL ASSISTANCE APPLICATION
2010–2011 Academic School Year

Please list all persons dependent upon family and financial support:

Name	Age	School/Occupation	% Support Received From Family
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I have examined the information given and certify that to the best of my knowledge and belief, they are a full, true and accurate statement of facts.

Signature of Applicant	Date
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Signature of Applicant	Date
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Applicants:

Please make sure that you have included all required materials:

- *2009 Federal Tax Returns (including W-2s and schedules)*
- *Copies of last two pay stubs for working parents or guardians*
- *\$50 per child (this amount will be applied to any unassisted balance due)*

Completed application and above information must be received by Friday, March 5, 2010.

Fax'd or e-mailed documents will not be accepted.

For Keystone Montessori Charter School, Inc.: Initials:	Date:
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