



Mansfield Cooperative School
Financial Aid Application for 2017-18
CONFIDENTIAL

Limited opportunities for financial aid for the 2017-18 school year are available through a generous donation by a community member. Financial aid decisions will be made on a rolling basis and are open to current and new families. The financial aid application is independent of the school application process.

Financial aid awards are for one year only. Families need to apply each year they are requesting financial aid. Returning families are given priority. In order to consider your application for financial aid, we require the following documents.

- Financial Aid Application Form
- 2016 W-2s and/or Schedule C
- 2016 Tax Return

Your application for financial aid will not be considered until all documents are provided. Decisions about admissions will be made prior to decisions about aid awards. Therefore, if you are also applying for admission, please wait to apply for financial aid until an admission decision has been made.

If you have any questions, please feel free to contact our director, Jessie Kochelyaev. Jessie can be reached via email, mansfieldcoopvt@gmail.com, or phone, (802) 858-5257.

Mansfield Cooperative School provides equal opportunity for all students and applications for admission or employment and does not discriminate based on race, color, creed, religion, family systems, national and ethnic origin. It does not discriminate in administration of its educational policies, admission policies, and school administered programs. Mansfield Cooperative School is committed to having a diverse body of learners, with a range of interests, backgrounds and abilities. Differentiating instruction to ensure that each child is learning at his/her instructional level is at the heart of what we do every day. However, we do not have learning or behavioral specialists on staff at this time. Thus, we may deny admission or re-enrollment to a child if we feel he/she may be better served at another educational setting that offers instruction or resources more suited to the child's educational, behavioral or social-emotional needs.



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Household Information

Parent/Guardian Information

Parent/Guardian A

Name: _____

Address: _____

Phone: _____ Email: _____

Parent/Guardian B

Name: _____

Address: _____ Check here if address for Parent/Guardian B is the same as above

Phone: _____ Email: _____

Applicant Information

Complete this section for each child applying.

Applicant A:

Name _____

Age _____ Birthdate _____ Grade for 2017-18 school year _____

Applicant B:

Name _____

Age _____ Birthdate _____ Grade for 2017-18 school year _____



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Employment Information

Parent/Guardian A

Name: _____

Primary Employer: _____

Occupation: _____ Annual Salary: _____

Hours worked per week: _____ Weeks worked per year: _____

Secondary Employer: _____

Occupation: _____ Annual Salary: _____

Hours worked per week: _____ Weeks worked per year: _____

Additional employment: _____

Parent/Guardian B

Name: _____

Primary Employer: _____

Occupation: _____ Annual Salary: _____

Hours worked per week: _____ Weeks worked per year: _____

Secondary Employer: _____

Occupation: _____ Annual Salary: _____

Hours worked per week: _____ Weeks worked per year: _____

Additional employment: _____

Income and Assets

Adjusted Gross Income _____
(from 1040)

Non Taxable Annual Income _____
(e.g. child support, veteran's benefits, 401k contributions, etc.)

Value of Investments _____
(e.g. cash, savings, checking accounts, stocks, retirement funds, etc.)



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Additional Information

We ask families to pursue every means of raising tuition on their own, including support from family. Will you be receiving help paying for tuition from a family member or friend? If yes, please explain.

Please list the vacations your family participated in last year and the associated costs for your family.

Is there any additional information that you would like to share with the Mansfield Cooperative School Director regarding your financial situation?

Financial Assistance Requested

Tuition at Mansfield Cooperative School is currently \$9,000.

Amount you feel you can reasonably contribute: _____

Amount of assistance you might receive from family/friends: _____

Amount of financial aid you are requesting: _____



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False information will disqualify an applicant from receiving financial assistance. I/We have completed this form to the best of my/our knowledge with information that is true, correct, and complete. I/We understand that additional information may be requested in order to best assess our financial need.

Signature

Date

Signature

Date

Please submit this application along with the required documents:

- 2016 W-2s and/or Schedule C
- 2016 tax return

Mail to:

Mansfield Cooperative School
P.O. Box 88
Richmond, VT 05477

Or email to:

mansfieldcoopvt@gmail.com