

# Bellevue Sports Athletic Association, Inc.

<b>CONFIDENTIAL FINANCIAL ASSISTANCE INFORMATION FORM</b>
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Are you applying for Reduced Fee? \_\_\_\_\_ Are you applying for Fee Waiver? \_\_\_\_\_ Payment plan? \_\_\_\_\_

Parents Info:

**PERSONAL:** Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone-Home ( \_\_\_\_\_ ) \_\_\_\_\_ Business ( \_\_\_\_\_ ) \_\_\_\_\_

Spouse's Name or other adult contributing to household (\*) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone-Home ( \_\_\_\_\_ ) \_\_\_\_\_ Business ( \_\_\_\_\_ ) \_\_\_\_\_

All dependent children in household's info under 18 years of age:

**DEPENDENT CHILDREN**

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Name of School \_\_\_\_\_ Tuition Fee \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Name of School \_\_\_\_\_ Tuition Fee \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Name of School \_\_\_\_\_ Tuition Fee \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Name of School \_\_\_\_\_ Tuition Fee \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Name of School \_\_\_\_\_ Tuition Fee \_\_\_\_\_

Are any children receiving free or reduced school tuition? \_\_\_\_\_ Amount reduced \_\_\_\_\_

**EMPLOYMENT:** Are you currently employed? \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Occupation \_\_\_\_\_ Length of time with firm \_\_\_\_\_

Is your spouse or other adult in household (\*) currently employed? \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Occupation \_\_\_\_\_ Length of time with firm \_\_\_\_\_

(\*) Household means a group of related or non-related individuals who are living as one economic unit and sharing living expenses. Living expenses include rent, clothes, food, doctor bills, utilities, etc.

**STUDENT (the parent):** Are you presently in school?  
\_\_\_\_\_

Full time? \_\_\_\_\_ Part time? \_\_\_\_\_ Receiving Financial Aid? \_\_\_\_\_ Amount \$ \_\_\_\_\_

When do you expect to graduate? \_\_\_\_\_

**INCOME:** Monthly gross \$ \_\_\_\_\_ Spouse's gross \$ \_\_\_\_\_

Are you currently receiving any local, state or federal assistance?  Yes  No

If yes, which \_\_\_\_\_

Case No. \_\_\_\_\_ Monthly Amount \$ \_\_\_\_\_

Are you currently receiving child support?  Yes  No Monthly Amount \$ \_\_\_\_\_

Are you currently receiving a pension or retirement?  Yes  No Monthly Amount \$ \_\_\_\_\_

Are you currently receiving unemployment?  Yes  No Monthly Amount \$ \_\_\_\_\_

Are you currently receiving foster care income?  Yes  No Monthly Amount \$ \_\_\_\_\_

Other income (alimony) \$ \_\_\_\_\_

**HOUSING:** Do you own your home? \_\_\_\_\_ Rent? \_\_\_\_\_ Lease? \_\_\_\_\_

Monthly payment: \$ \_\_\_\_\_

**GENERAL:** What can you afford to pay toward your children(s) fee? \$ \_\_\_\_\_

Do you have unusual medical costs?  Yes  No Monthly Amount \$ \_\_\_\_\_

Are these medical costs covered by insurance?  Yes  No How Much? \$ \_\_\_\_\_

Special circumstances/expenses (please list dollar amounts) and comments that we should consider, the more information you give me about your personal situation, it will be easier for me to get to know you and your needs:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If more space is needed please use back of form. The information I have provided on this form is correct. My signature validates my agreement on financial assistance as outlined.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**NOTE:** We do not consider high monthly bills for a hardship (car, mortgage, lifestyle choices, etc.).