



TINY FINDINGS, INC.
Child Development Center

CONFIDENTIAL TUITION ASSISTANCE APPLICATION

Date: _____

1. **Child's Name:** _____

Address: _____

Home Phone: _____ Date of Birth: _____

2. **Mother's (or Guardian's) Name:** _____

Address: _____

Employer & Address: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

3. **Father's (or Guardian's) Name:** _____

Address: _____

Employer & Address: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

4. **List other children under 18 years (with ages) for whom you are financially responsible:**

5. **Annual salary (gross) of custodial parent or parents:**

Mother: \$ _____ Father: \$ _____

6. **Other annual income of custodial parent (s):**

Child support: \$ _____ Alimony: \$ _____

The information in this application and the attached worksheet is subject to verification by the Scholarship Committee at the time the application is submitted and on an annual basis. Updated financial records (such as tax returns) must be submitted each year in order to remain eligible for tuition assistance. This application is incomplete without attached copies of your most recent federal income tax return. Verification of income must be submitted for each custodial parent.

I certify that all statements and information given above are correct and authorize Tiny Findings, Inc. to verify all statements.

Signature of
Parents/Guardians: _____



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TUITION ASSISTANCE WORKSHEET

Mother's (or Guardian's) Gross Annual Salary: _____ (1)

Father's (or Guardian's) Gross Annual Salary: _____ (2)

Child Support Received: _____ (3)

Alimony Received: _____ (4)

Foster Child Income Received: _____ (5)

Rental Property Income: _____ (6)

Other Income (please specify): _____ (7)

SUBTOTAL (add lines 1-7) _____ (8)

Number of Dependent Children: _____ x \$2,150 = \$ _____ (9)

Subtract your deduction for dependent children from your subtotal income to get your revised annual family income (subtract line 9 from line 8).

REVISED ANNUAL INCOME: _____ (10)