

Butler Extended Day Program

90 White Street, Belmont, MA 02478
617-484-8913

Date: April 27, 2017
To: Applicants for Financial Aid
From: Pam Curtis, BEDP Administrator
Re: Applications for 2017-18

Enclosed is an application for financial aid for the 2017-18 school year. Please read the instructions carefully and complete all applicable blanks. Be sure to submit all documentation, as required. Incomplete applications or applications without the required documentation cannot be considered. You must apply for financial aid each school year, if you wish to be considered.

BEDP attempts to assist as many families as possible within its financial aid budget and to make sure that aid goes where there is the most demonstrated need. In making determinations of need, BEDP considers, in addition to the applicant's income, the need for a BEDP program as day care. Thus, BEDP gives preference to applicants who hold a full time job and need BEDP in order to continue working or who attend school or a job training full time. In two parent families, this means that both parents must work and/or attend school during BEDP hours. Attending school for our purposes means that the person is pursuing a degree, certificate, license or other credential. The Butler Extended Day Program is totally self-supporting. It receives no financial assistance from the Belmont Public Schools, the Butler PTA or any other organization. BEDP's sole source of income is tuition. For this reason, the financial aid budget must be strictly monitored each year, and is limited. *The fact that you qualify for a sliding scale payment for the full day kindergarten program is no guarantee that you will get financial aid through BEDP, but it will be taken into consideration.*

Anyone who does not receive financial aid but feels that he or she will have a problem making the regular payments on schedule should speak to me as soon as possible. BEDP will try to arrange payment plans for families that need them. It is important not to get into a situation where you fall behind on the monthly payments and then have to withdraw your child from the program.

BEDP has a voucher contract with the Child Care Circuit in Lawrence enabling us to accept childcare vouchers for tuition. If you are currently receiving vouchers, please indicate this on your application. The Department of Early Education and Care (EEC) now manages the centralized waiting list for EEC financial assistance (vouchers). For information or to register for the waitlist, contact the Northeast office of the EEC by phone 978-681-9684, fax 978-689-7618.

BEDP will consider all applications for financial aid received by June 30. After that date, applications will be considered only if there is still financial aid left in the budget.

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FINANCIAL AID APPLICATION INSTRUCTIONS

Attached is a financial aid application for the 2017-18 school year. Please take a minute to read the following information and instructions. BEDP would like all applicants to understand the following.

- ◆ Financial aid, if awarded, will take the form of tuition waivers, applied to each monthly payment. In most cases, families will be expected to pay some part of the monthly fee. Full tuition waivers will be given only in *extraordinary* circumstances.
- ◆ Anyone who receives a partial tuition waiver will be responsible for making timely payments on the balance. *Failure to make payments will result in the termination of the child's enrollment in BEDP.*
- ◆ In the event that the number of qualified applicants exceeds the financial aid budget, awards will be made on the basis of greatest need, as determined by BEDP.
- ◆ If there are no applicants judged to meet the need criteria as set out by BEDP, no financial award will be awarded.
- ◆ BEDP reviews the financial aid program at the end of each school year and offers no guarantee that financial aid will be offered in subsequent years.
- ◆ In awarding financial aid, BEDP will give preference to those applicants who need a BEDP program for their child in order to continue working at a full time job, to attend school or a job training program full time.
- ◆ All information submitted on financial aid applications will be treated as confidential

Financial Aid Eligibility

The following guidelines will be used by the program administrator and board in determining eligibility for financial aid. Families who are considering whether to apply for aid should see whether they qualify under either of these guidelines.

Your family receives free or reduced price school lunch, free or reduced fee full day kindergarten, SNAP, TAFDC, WIC or other public subsidy/assistance programs.

Your gross annual income is at or below 50% of the state median income of 72,192. (effective July 1, 2016) for a family of two (adjusted for larger family size)

BEDP will consider financial aid requests from families in other circumstances (for example, serious illness or disability of a primary caretaker or immediate family member), but the general policy is to offer assistance to low income families who need childcare to work, or to attend school or a job training program fulltime. When in doubt, submit an application.

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Financial Aid Application 2017-18

Please complete all blanks. List all children for whom you are applying for aid on one form. Incomplete applications will not be considered. You will need to submit both a federal tax return from 2016 and pay stubs from the past two months, assuming you are working.

Name of Child _____ Grade in Sept. 2017 _____
Name of Child _____ Grade in Sept. 2017 _____
Name of Child _____ Grade in Sept. 2017 _____

Parent/Guardian:

Name _____ Relationship to Child _____
Address _____ City/State/Zip _____
Phone (home) _____ (work) _____

Name _____ Relationship to Child _____
Address (if different from above) _____
Phone (home) _____ (work) _____

If parents are separated or divorced, who will be responsible for paying tuition?

Name _____

Program(s) attended/applied for (check all that apply)

- Morning Care Days per week _____
- BEDP Days per week _____
- Late BEDP Days per week _____

Need for Day Care

Do you work or attend school or a job training program (complete applicable blanks)

Mother:

- Work full time (list hours) _____
- Work part time (list hours) _____

Name and address of employer _____

- Attend school or training program full time (list hours) _____
- Attend school or training program part time (list hours) _____
- Type of degree, certificate, license or credential being pursued _____

Name and address of school or program _____

Father:

- Work full time (list hours) _____
- Work part time (list hours) _____

Name and address of employer _____

- Attend school or training program full time (list hours) _____
- Attend school or training program part time (list hours) _____
- Type of degree, certificate, license or credential being pursued _____

Name and address of school or program _____

If you do not work or attend school or a job-training program, why do you want your child in a BEDP program?

Aid already received (please check all that apply)

- Free or reduced price lunch through the Belmont School Lunch Program
- Child cares vouchers; will you continue to get a voucher for the 2017-18 school year? ___ Yes ___ No
- SNAP, TAFDC, housing subsidy or other public assistance (list type and case number, if applicable)

Family Size and Income

Number of dependent children _____ Other dependents _____ (as listed on 1040 tax form)

Gross Monthly Income:

Parents Earnings from Work (include wages, salaries, tips, strike benefits, unemployment compensation, worker's compensation, net income from self-owned business) _____

Child Support/Alimony _____

Pensions/Retirement/Social Security (include pensions, supplemental security income, retirement income, veteran's payments, social security) _____

Other Income (include disability benefits, cash withdrawn from savings, interest/dividends, income from estates/trusts/investments, regular contributions from persons not living in the household, net royalties/annuities, net rental income, any other income) _____

How many weeks or months do you foresee your child needing this financial assistance? _____

Please briefly explain any factors that should be considered in your request for financial assistance. Describe any temporary or permanent hardships that would not be obvious from your gross income information listed above.

Please check below if either or both apply to you.

- I did not file a federal tax return for 2016
- I am a full time student and am not presently working.

Please attach a copy of your federal income tax return for 2016 and last two pay stubs to this application. If you did not file an income tax return in 2016, you still should submit the pay stubs and indicate on the application that you did not file a 2016 federal income tax return. Full time students, who are not working, should indicate this on the application. Please verify all claims that you receive public assistance (e.g., vouchers, TAFDC, food stamps, free lunch) with the appropriate documentation.

I/We declare that the information on this application is true, and complete, to the best of my/our knowledge.

Signed _____ relationship to child _____ date _____

Signed _____ relationship to child _____ date _____