Nantucket Community School

FINANCIAL ASSISTANCE APPLICATION – CAMP/CHILDCARE/EXTENDED DAY

Please complete this application and submit along with <u>photocopies</u> of the following required documentation. Applications may be submitted at either NCS office location – 56 Centre Street or at our Elementary School office.

- Most recent tax return or income statement
- 2 or 3 consecutive Pay Stubs or Employment Letter
- Supporting documentation of court-ordered child support, if applicable

CONTACT: Susan Richards at 508-228-7285 x1573 or richardss@npsk.org if you have any questions or to discuss your application.			
CHILD INFORMATION			
Child's Name			
Date of Birth (Month/Day/Year)		Child lives with:	□ Mother □ Father □ Other _____
Physical Address City, State ZIP Code		Mailing Address (if applicable)	
Other Children/Ages in Household			
Additional Children in the program applying for aid.			
FAMILY INFORMATION			
Name of Primary Contact			
Relationship to child			
Name of Secondary Contact			
Relationship to child			
Physical Address City, State ZIP Code		Mail Address (if applicable)	
Home Number		Place of Work	
Cell Number		Work Phone Number	
Email Address		# of people in household	
FINANCIAL INFORMATION			
Contributes to household income	□ Mother □ Father □ Other _____		
Primary Caregiver works	□ Full Time □ Part Time	Hours Worked Per Week	
Secondary Caregiver works	□ Full Time □ Part Time	Hours Worked Per Week	
		Child Support/Alimony	$
		Unemployment/Social Security	$
		Other (specify WIC, SNAP, etc.)	$

		TOTAL monthly income from all contributing adults before taxes	$
		Monthly rent or mortgage	
Additional Expenses we should consider:			

PROGRAM INFORMATION

Which program will your child /children be attending?	
How many weeks will they be enrolled?	
What is the weekly/monthly fee of this program?	

ADDITIONAL INFORMATION

Please describe your financial need. Is there any additional information you would like to provide?