



Roycemore School

Inspiring Excellence – Celebrating Individuality

APPLICATION FOR FINANCIAL AID 2009-2010

Only one application is necessary from a family. If more than one student is applying for financial assistance, provide information for each applicant on the same form. *Please return to the Office of the Headmaster at Roycemore School.*

Student Name _____ Birthdate _____ Sex M / F Current Student ___ New Student ___

Parent Name _____ Telephone (Home) _____

Address _____ Office (Father) _____

City/Zip _____ Office (Mother) _____

Email (Mother) _____ Email (Father) _____

Anticipated Grade, Program & Service for 2009-10: Grade _____ Busing Yes / No Extended Day Program until _____

If application is for Junior Kindergarten or Kindergarten please indicate anticipated length of day: 11:30 _____ 3:00 _____ 6:00 _____

Who is responsible for meeting the educational expenses for this applicant?

Father and Mother _____ Father Only _____ Mother Only _____ Other (please specify) _____

On what date was the Parents' Financial Statement mailed to the School & Student Service For Financial Aid? _____

Is either parent a full-time employee of Northwestern University or NorthShore University HealthSystem? Yes / No

Please describe any unusual circumstances which affect the family's ability to meet education expenses.

Based on your appraisal of the financial circumstances, how much can the family afford to pay to cover the educational costs for the student?

Is this application for financial assistance a result of an isolated situation or a case of continuing need?

If parents are separated or divorced, have they discussed the education for their child and the financial arrangements for it? Yes / No
If no—please explain why not; if yes—please describe the arrangements.

Signed by Parent or Guardian _____ Date _____