



Tuition Assistance Application

Confidential

120 Howeville Road
 Fitzwilliam, NH 03447
 www.fleurdeliscamp.org
 603.585.7751

Tuition Assistance Process

Deadline

- | | |
|---|--------------------------|
| <input type="checkbox"/> Camper registers through website | Open Enrollment |
| <input type="checkbox"/> Signed Tuition Assistance Application and supporting documents to be received | by Feb. 20 th |
| Must attach copies of W2's, 1040 and supporting schedules for the current tax year for all parents regardless of marital status. If current year 1040 is not available – you may submit prior year now and current year as available. | |
| <input type="checkbox"/> Notification of Award sent to recipient | by April 20th |
| <input type="checkbox"/> Recipient to accept or decline award | by April 30th |

PART I: APPLICANT INFORMATION

Camper(s) Name:	Date of Birth:	Grade entering in the fall:	Preferred Session * (see below)	Last year camper attended FdL

***Sessions Available:**

Session I (June/July)	3.5 weeks	June 23 -July 16	Intro I (June/July)	2 weeks	June 23 - July 6
Session II (July/Aug)	3.5 weeks	July 18 - Aug 10	Intro II (July)	2 weeks	July 18 - July 31
5.5 Week Session	5.5 weeks	July 3 – Aug 10	Try-it I (June)	1 week	June 23 - 29
Full Summer	7 weeks	Jun 23 – Aug 10	Try-it II (July)	1 week	July 18 - 24

Applied for Tuition Assistance Last Year: YES NO

Received Tuition Assistance Last Year: YES NO Amount Received \$ _____

Name of Parent/Guardian (1) _____

Home Address _____

E-mail Address _____

Telephone Numbers (h/w/c) _____

Occupation, Position & Present Employer _____

Name of Parent/Guardian (2) _____

Home Address _____

E-mail Address _____

Telephone Numbers (h/w/c) _____

Occupation, Position & Present Employer _____

Camper Name: _____



If either parent/guardian is unable to work or unemployed, please give the most recent position, employer, and dates of employment/inability to work: _____

Check All That Apply					
<input type="checkbox"/>	A Parent is deceased	<input type="checkbox"/>	Parent with no custody	<input type="checkbox"/>	Parents married
<input type="checkbox"/>	Parents divorced^	<input type="checkbox"/>	Parents separated^	<input type="checkbox"/>	Parent FdL alumnae
<input type="checkbox"/>	Parents never married	<input type="checkbox"/>		<input type="checkbox"/>	Other family alumnae

^please include forms for each parent

PART II: PARENTS' INCOME & EXPENSES

Please attach all copies of W2s, current form 1040, and all schedules for each parent. Please report on the current year, if your current year tax return is not available, you may complete form based on previous year, however, you must include the current year W2. Current year must be submitted when available and award may change based on current year information.

Parents Annual Income & Expenses (per attached tax return)

- 1. Salaries and Wages of Parent/Guardian (1) \$ _____
- 2. Salaries and Wages of Parent/Guardian (2) \$ _____
- 3. Taxable Dividends and/or Interest Income from 1099 Statements..... \$ _____
Please list source: _____
- 4. Alimony \$ _____
- 5. Net Profit/Loss from Business and/or Farm \$ _____
- 6. Other Taxable Income**(see below) \$ _____
6a. Please list source: _____
- 6b. Business Assets \$ _____ Liabilities \$ _____ Ownership _____ %
- 7. **TOTAL TAXABLE INCOME (lines 1-6)**..... \$ _____
- 8. Nontaxable Income (Social Security, Child Support) \$ _____
Please list source: _____
- 9. **TOTAL INCOME (lines 7-9)**..... \$ _____

**Pensions, Annuities, Rent Royalties, Estates or Trusts, Household Expenses paid by Separated or Divorced Spouse in Lieu of Alimony, Unemployment Compensation, Capital Gains, etc.

PART III: ASSETS & LIABILITIES

- Total of Parents' Bank Accounts & Other Investments at Market Value..... \$ _____
- Child's Own Assets (Including Trust Funds, Inheritance, Annuities) \$ _____
- Consumer Debt (Credit Cards)..... \$ _____

Home (if owned; rented facilities listed in PART IV)

Year Purchased _____ Purchase Price \$ _____
Annual Payment \$ _____ Current Assessed Value \$ _____



Camper Name: _____

How much can your family afford to spend on summer camp for your child/children? \$ _____

How much tuition assistance is being requested from Fleur de Lis Camp? \$ _____

From what sources will the balance of the camp tuition be paid? _____

Is there any additional information that you consider relevant for the committee to consider?

**Mail application and supporting documents to:
Fleur de Lis Camp | Attn: T.A. Committee | 120 Howeville Rd. Fitzwilliam, NH 03447**

PART V: AFFIRMATION OF COMPLETE & TRUTHFUL INFORMATION

I declare that all information reported on this form, to the best of my knowledge and belief, is correct, true, and complete. I have attached all copies of W2s, current form 1040, and all schedules; I understand failure to provide documents may result in a delay in processing or in the inability of the committee to make an award.

INCLUDE A COPY OF CURRENT TAX YEAR DOCUMENTS

(If current year 1040 is not available – you may submit prior year now and current year as available. If parents are divorced, separated, or never married, both parents must complete this form and submit documents.)

Signature of Parent/Guardian (1) Date

Signature of Parent/Guardian (2) Date

Fleur de Lis Camp wants to make camp available to as many girls as possible regardless of their ability to pay. This program is open to all girls regardless of race, color, ethnicity, gender identity, religion, national origin, disability, sexual orientation, age, or socioeconomic background.



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Camper Name: _____