

Financial Aid Application Form

The **Connie Johnson Financial Aid Funds** provide tuition assistance to several families every school year. Financial aid recipients are chosen primarily based on financial need. Applicants must meet the minimum guidelines (household income equal to 175% of the current Federal Poverty Guidelines) to be eligible. Meeting House Nursery School does not and shall not discriminate based on race, color, sex, creed, handicap, national origin, sexual orientation, or ancestry.

As part of the financial aid process, we ask families to also apply for [Wisconsin Shares](#). Once you hear about your eligibility, please email [Devon Zuleger, MHNS Executive Director](#).

Please complete all sections below. The information provided will be confidential and used only for eligibility determination and verification of data. Return this form to the Executive Director, Meeting House Nursery School, 900 University Bay Drive, Madison, WI 53705 with your registration materials.

You may be asked to provide more detailed information.

* Indicates required question

1. Email *

Family Data

2. Name of child: *

3. Programming enrollment for coming school year: *

Mark only one oval.

- ☐ Two Year old: Monday-Friday
- ☐ Two Year old: Monday/Wednesday/Friday
- ☐ Two Year old: Tuesday/Thursday
- ☐ Three Year old: Monday-Friday
- ☐ Three Year old: Monday/Wednesday/Friday
- ☐ Three Year old: Tuesday/Thursday
- ☐ 4k AM
- ☐ 4k Full Day

4. Parent/Legal Guardian: *

5. Phone Number: *

6. Address: *

7. Parent/Legal Guardian (2):

8. Parent/Guardian (2) Address if different from above:

9. Parent/Guardian (2) Phone Number:

10. Name and relationship of household members (list ages of children): *

Financial Data

Family Members 175% Federal Poverty Level

1: \$15,060

2: \$20,440

3: \$25,820

4: \$31,200

5: \$36,580

6: \$41,960

7: \$47,340

8: \$52,720

9+: add \$5,380 for each extra person

11. Current employment of all household members: *

12. Monthly Household Income (include all sources such as wages, salary, SSI, child support, alimony, annuities, government assistance, etc.) : *

13. Are you eligible for CCTAP (Child Care Tuition Assistance Program) through the University? *
Please Note: If you do not state your eligibility for CCTAP and it becomes available to you, your scholarship award will be reduced by that amount. In addition, an increase in CCTAP funds will decrease scholarship awards.

Mark only one oval.

☐ Yes

☐ No

14. Have you applied to the Wisconsin Shares program? *

Mark only one oval.

☐ Yes

☐ No, but it is on my to-do list

15. Monthly Expenses (include housing, utilities, food, child support, medical, transportation, etc.): *

16. Please explain briefly, why you are applying for this financial aid, why financial assistance is important to you, and why you want your child to attend Meeting House Nursery School. You may also use this space to provide additional information or describe circumstances that are pertinent to this financial aid application.: *

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