



**FINANCIAL AID APPLICATION FOR
RYAN FAMILY SCHOLARSHIPS
2021-2022**

Keith Country Day School (KCDS) is able to provide need-based financial aid for children in grades one through twelve. Aid is reviewed annually. If you wish to apply for financial aid, please submit this form by **June 15, 2021**. The information included will remain confidential. In addition to completing this form, families must provide a copy of the previous year's tax return and/or W-2s. New students to KCDS must submit a completed application for admission to be considered for financial aid.

Student name(s)

Street Address City Zip

Custodial Parent(s) or Legal Guardian(s)

Home Phone Cell phone

Email Address

FAMILY/PARENTAL INFORMATION

Complete the grid below for all of your family members who live in your household. Include all children claimed as exemptions on your taxes or other relative(s) who live with you; (b) receive half or more of their support from you; and (c) who will continue to receive that support between July 1, 2021 and June 30, 2022. List the schools and colleges which family members attend half-time or more in 2021-2022. [full-time: F/T; half-time: H/T].

Full Name	Date of Birth	Relationship to Student	School/College in 2021-2022	Grade Level in 2021-2022	F/T or H/T
1. Student:		Applicant			
2.					
3.					
4.					
5.					
6.					

NON-CUSTODIAL PARENT INFORMATION

Complete this section unless both of the child(ren)'s natural (or adoptive) parents are listed in the family grid.

Year of: Separation_____ or divorce_____. If they are not separated or divorced, please note change in circumstance box below.

Other parents name_____ His/Her annual child support for the child \$_____ When will this end? _____

Other parent's address_____

How much does he/she contribute toward educational costs\$_____ Is there a legal agreement specifying this amount?_____

Who claimed the student(s) for a tax exemption for 2020?_____

Who will claim the student(s) for 2020?_____

FAMILY INCOME INFORMATION

Use line 37 on the 1040 or line 4 on the 1040 EZ for adjusted gross income.

Name	Adjusted Gross Income	Other income (public assistance, child support, Social Security, etc.)
1. Parent 1:		
2. Parent/Stepparents 2:		
3.		
4.		

CHANGE IN/UNUSUAL CIRCUMSTANCES

Do you anticipate a significant change in income for the school year for which you are applying for financial aid (i.e. loss of job, separation/divorce, illness, injury or medical expenses, income and or child support reduction, etc.)? Please specify below and provide detailed information.

Change in/Unusual circumstance; Notes or Comments:

SIGNATURES

All of the information on this form is true and complete to the best of our knowledge. We agree to provide documentation for this information, which may include a copy of the U.S. tax income tax returns. The student may not receive aid if we do not provide proof when asked.

Parent/Stepparent/Guardian Signature _____ **Date-**

Parent/Stepparent/Guardian Signature _____ **Date-**

RETURN THIS FORM AND THE REQUIRED DOCUMENTATION TO:
OFFICE OF FINANCIAL AID, KEITH COUNTRY DAY SCHOOL, 1 JACOBY PLACE, ROCKFORD, IL 61107
EMAIL TO: ADMISSIONS@KEITHSCHOOL.NET

Notice of Nondiscriminatory Policy: Keith Country Day School does not discriminate on the basis of age, sex, race, creed, national origin, disability, handicap, sexual orientation, or political affiliation in the admission of students, or the participation in educational programs, activities, financial aid or employment.