



2020-2021 Financial Aid Application (\$50 Non-Refundable Application Fee Per Family)

Financial Aid Information

Families who are in a condition of financial hardship and who provide solid proof of such hardships will be qualified to apply for scholarship for their children. Al Manara Academy is limited to how much financial aid it can afford to give in scholarships every year. Some families may qualify for a 33% discount in tuition or maximum 66% discount in tuition, depending on income and whether supporting documentation is submitted. All applications will be carefully reviewed and compared with each other for the purpose of determining who should be given first priority. **Also, it should be clear that NO APPLICATION FOR RETURNING STUDENTS WILL BE ACCEPTED AFTER July 31, 2020.**

The following documents must be included with the completed application before July 31, 2020, otherwise, the application will not be processed.

1. **A COPY OF YOUR 2019 FEDERAL INCOME TAX FORM (1040) and W2 or 1099 form**
2. **COPIES OF YOUR LAST 2 PAY STUBS**
3. **UNEMPLOYMENT CERTIFICATE (if applicable)**
4. **BANK STATEMENTS for THE LAST 2 MONTHS**
5. **COPY OF SUBMITTED APPLICATION FOR MISSOURI CHILD CARE SUBSIDY. This is a MANDATORY if one of the children you are enrolling is 5 years old or younger. This rule is also applicable if the child is older than 5 but younger than 13 years old. You do NOT need to submit this if your child is older than 13.**

Use this link to determine if you are eligible for benefits:

<https://apps.dss.mo.gov/fmwBenefitCenter/PreEligibilityTool.aspx>

After submitting the DSS application online, print 'Do I Qualify Results' and include with the documents mentioned in items 1-4 above.

***Note: Please be aware that the Missouri Child Care Subsidy Application Submission is required, and does not replace the Al-Manara Financial Aid Application.**

Nondiscriminatory Statement

Al Manara Academy admits qualified students of any race, national, and ethnic origin to all of the rights, privileges, programs, and activities generally accorded or made available to students. It does not discriminate on the basis of race, national and ethnic origin, or gender in the administration of its educational policies, admissions policies, financial aid programs, or athletic and other school programs.



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General Student Information

How many of your children will you be enrolling with Al Manara Academy for the 2020-21 school year? _____

Please list the students below:

Student Full Name: _____ Grade: _____

Student Full Name: _____ Grade: _____

Student Full Name: _____ Grade: _____

Student Full Name: _____ Grade: _____

Household Information

*Father's Full Name:

*Father's Mobile Phone:

Father's Email Address:

*Father's Social Security Number:

*Mother's Full Name:

*Mother's Mobile Phone:

Mother's Email Address:

*Mother's Social Security Number:

Marital Status:

Married Separated Divorced Widowed Other: _____

* Father's Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____



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* Mother's Home Address: _____ (same as Father)
City: _____ State: _____ Zip Code: _____
Home Phone: _____

Tax Filing Status:

- Single Married filing jointly Married filing separately Head of household Other:

***Parents filing single or filing separately MUST provide tax copies for BOTH parents**

Financial Information

Will the parents/guardians claim the student as an income tax exemption this year?

- Yes
 No

Do you or your spouse receive an untaxed income?

- Yes
 No

Do you or your spouse receive child support?

- Yes
 No

I certify, under the penalty of perjury and fraud, that all of the information in this form is true and complete to the best of my knowledge. I agree to give proof of the information that I have included in this application. I realize that this proof may include a copy of my Bank Statement, Social and Public Benefit Aid, Federal, State and/or Local Income tax returns. I also realize that if I do not give proof, the student(s) may be denied financial aid. I also authorize Al Manara Academy officials to check my credit and employment information from all my creditors and employers. The information requested can include my financial income and payments. **I also agree to pay my children's due monthly tuition fees by the only accepted ACH method (Bank Direct Withdrawal Check-O-Matic)**

Parent Signature:

Date:



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Verification of Employment: FATHER

*Father Employer _____

*Employer Address: _____

*City _____ *State _____ *Zip Code _____

*Employer Phone: _____

* Father Occupation: _____

*Monthly Income: _____

Do you work part-time or full-time?

- Part-time
 Full-time

Verification of Employment: MOTHER

*Mother Employer: _____

*Employer Address: _____

*City _____ *State _____ *Zip Code _____

*Employer Phone: _____

* Mother Occupation: _____

*Monthly Income: _____

Do you work part-time or full-time?

- Part-time
 Full-time

By signing your name below, you authorize your employer to provide all the information needed by the administration of Al Manara Academy to verify your employment information. Any false declaration may result in denial of financial aid, and could result in other legal actions.

Parent Signature: _____

Date: _____



AL MANARA
ACADEMY

ANNUAL CHECK – O – MATIC TUITION PAYMENT FORM (ACH)
(One per family)
_____ (office use)

PARENT FULL NAME

First

Middle

Last

Monthly Tuition of \$ _____ payable from _____ 2020 to _____
2021

Child Name Grade

Child Name Grade

Child Name Grade

Child Name Grade

I give permission to Al Manara Academy to withdraw from my bank account the monthly tuition payments I have indicated above. I also understand that I may change or end tuition payments at any time with a written notice.

Bank Name

Bank Routing Number (9 digits number preceding bank account number.)

Bank Account number

Signature

Date

Voided check is required for verification purposes.
\$20 charge for Returned payment