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**FOR OFFICE USE ONLY:**

**Date Submitted:** \_\_\_\_\_  
**Info Verified:** \_\_\_\_\_  
**Approved:** Y / N  
**Tuition Amt:** \_\_\_\_\_  
**Fees Prorated:** Y / N  
**Fee Payment:** \_\_\_\_\_

**BRIGHTER HORIZON SCHOOL OF BATON ROUGE**  
**Financial Assistance Application**  
**2017- 2018 Academic Year**

Financial Aid is awarded based on the applicant’s demonstrated need and BHS’s available funds. To help determine the need of each family, we require parents to complete the following confidential form and submit the listed items.

1. Your application will not be considered until you have registered your child(ren) at BHS and paid the registration fee on behalf of your child.
2. This form is due to the BHS no later than May 31, 2017 Applications will be accepted later but will be considered on a first come basis until all funds are disbursed.
3. To avoid delays please provide a copy of ALL requested documents noted below.
4. If your child receives financial aid, he or she will not be eligible for any other discounts. If you are an employee at BHS, you may apply for financial assistance or faculty discount, but NOT both.
5. Financial aid is limited to a maximum of 50% of tuition depending on availability of funds and financial status of family.
6. Parents receiving financial assistance are required to volunteer to BHS as follows. Parents are also expected to be active participants in assisting the Parent Teacher Organization (PTO). Parents who work during school hours are expected to volunteer as well.

Discount	Required Volunteer hours per month
50 – 41%	20
40 – 31%	15
30 – 21%	10
20 – 11%	5
10 – 1%	5

Please make sure to submit the following items with your Financial Assistance application:

- \_\_\_\_\_ Last year’s Federal Income Tax Return (all schedules)
- \_\_\_\_\_ Completed business income statement (if you own a business) or W-2 form (if you have a job)
- \_\_\_\_\_ Proof of expenses (e.g., electric bills, phone bills, water bills, rent, car payments, house payments, etc....)
- \_\_\_\_\_ Last 3 check stubs if salary is obtained by a paycheck
- \_\_\_\_\_ Last 3 bank statements (or 3 month average)

## Financial Assistance Application Form

Student(s) information you are submitting this application for:

Student(s) Name(s)	Grade
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Father's Name: _____	Telephone (H) _____
Mother's Name: _____	Telephone (W) _____
Email address: _____	Telephone (C) _____
Address: _____	
City: _____	State: _____ Zip code: _____

Please note that in case of divorced/separated parents, each parent MUST submit a financial aid application on behalf of his or her household in order for the student to be considered for an award.

### Income Information

Name, occupation and net income of ALL working adults in your household:

Name:	Occupation	Net Income per year
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Describe the state and value of all your assets in the USA and anywhere else in the world:

\_\_\_\_\_  
\_\_\_\_\_ Total Value \$ \_\_\_\_\_

Check any of the following if it applies to you:

Checking Account \$ _____	Savings Account \$ _____
Own real-estate property \$ _____	Collect rent on rent houses \$ _____
Business ownership \$ _____	Partnership in business \$ _____
Food stamps/month \$ _____	Zakat/month \$ _____

Any information pertaining to income or explanation (continue on back if needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Expense Information**

**Residence (per month):**

House/Apartment Rent \$ \_\_\_\_\_ House Mortgage \$ \_\_\_\_\_  
House/Life/Renter Insurance \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

**Utilities (per month):**

Electric \$ \_\_\_\_\_ Water \$ \_\_\_\_\_ Gas \$ \_\_\_\_\_  
Phone \$ \_\_\_\_\_ Cable/Internet \$ \_\_\_\_\_

How many cars/vehicles does your household have? Please list the year, make and model

Make/Model	Year
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

**Car Expenses (per month):**

Payments \$ \_\_\_\_\_ Insurance \$ \_\_\_\_\_ Gas \$ \_\_\_\_\_  
Maintenance \$ \_\_\_\_\_

**Other Expenses (per month):**

Medical Insurance per year if not drawn from payroll \$ \_\_\_\_\_  
Food, Clothing, Misc \$ \_\_\_\_\_  
School supplies/trips \$ \_\_\_\_\_  
Alimony/Child Support/Elder Care Support \$ \_\_\_\_\_  
Consumer Debt payments (credit cards, medical debt, etc...) \$ \_\_\_\_\_

Please explain any extenuating circumstances you would like the Financial Aid Committee to consider and/or why you are requesting assistance (continue on back if needed):

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BHS is a non-profit school and is supported by the community of the East Baton Rouge. If tuition assistance is approved, the difference will be paid by either Masjid Zakat & Sadaqa (Charity) or from Community Members Sponsorship. Please check which option you would be willing to except (At least ONE box must be checked to be able to receive Financial Assistance):

- Zakat/Sadaqa/Charity
- Community Member Sponsorship

Parent(s)/Guardian(s)' Signature(s):

I have read and understood the Brighter Horizon School policy regarding financial assistance, and I hereby certify that we have checked this form for omissions and errors and to the best of our knowledge the information reported about our household is complete and accurate. I also understand that my child(ren) will be disqualified if I intentionally falsify this application. I authorize Brighter Horizon School to perform any and all necessary credit report check(s), as necessary.

Applicant Signature(s) \_\_\_\_\_ Date \_\_\_\_\_