



SMART TUITION AID

Holy Family School Parent Instructions for 2014-2015

Access Application

www.smarttuitionaid.com

School ID Code

Please use the following school ID code for **Holy Family School – 11519**

Application Deadline

Please submit your application and documentation by **3/14/2014**

Eligible Grades

Kindergarten - 6th Grade

Application Processing Fees

- Application Fee (required): **\$20**
- Business Fee (if applicable): **\$19** – Fee only applies to families filing: 1041, 1065, 1120 or 1120S.
- Parent Report Fee (optional): **\$8** – This report allows you to view the information submitted on your application.
This report does not display recommendations for financial aid.

Required Supporting Documentation

All applications are required to submit documentation to support their application. *Applications submitted without documentation will not be processed.*

- Most recent paystubs and W-2 forms for all jobs..
- Most recently filed tax return: 1040, 1040A, 1040EZ with all schedules.
- Most recently filed business tax return: 1040, 1065, 1120, 1120S (if applicable).
- Supplemental income documentation: Social Security, Welfare, Food Stamps, Child Support, 1099-M Forms, Workers Compensation, Unemployment, Veterans Benefits, Etc.

Submitting Documentation

Application IDs must be included on all documents. Failure to include your application ID will delay the review of your application.

- Email: documents@smarttuitionaid.com
- Fax: (610)-599-8633
- Mail: Smart Tuition Aid – PO Box 25116 Lehigh Valley PA 18002

Contact Information

- Phone Support: (800)-360-8027
- Email Support: support@smarttuitionaid.com

Notification of Financial Aid

Once your application is processed, a financial aid recommendation will be forwarded to **Holy Family School**. All final financial aid decisions, including notification of an award amount (if any) will be made by **Holy Family School**. If you have not received notification regarding financial aid, contact the financial administrator at **Holy Family School**. Please allow a minimum of four weeks after you have submitted your application and required documentation.



How to apply online

Please go to our website www.smarttuitionaid.com. For new families, you will need to click 'New Parent Registration.' From there you will be prompted to enter a valid e-mail address and a password of your choice. It is important your e-mail address is correct, as email is our first line of communication. Once you are confirmed with a username and password, you will be logged into our online site, where you will start the application process. For returning families, you can log in with your previous year's login information. For assistance in filling out the application or retrieving login information you can contact us either by phone at 1-800-360-8027 or by e-mail at support@smarttuitionaid.com.

Parent FAQ

Q: Who should complete this Tuition Aid form?

A: Whoever the child resides with should fill this application out, whether it is a parent, grandparent, aunt/uncle, or legal guardian. There is a section within the application where you can enter contributions from non-custodial parents and relatives.

Q: Why do I need to input my spouse's information if I am remarried and they are not legally responsible for my children?

A: Our calculation works off of the total household income, therefore including all income, whether the party is legally responsible for your children or not. Our system however, does take into effect your spouse's expenses as well as their income. It is important to list all expenses that are asked of within the application.

Q: Do I list all of the children in my household, even if they are attending another school?

A: Yes. You will need to list out all children within your household. That includes children attending another private school, children attending a public school, or children not attending school.

Q: What if I have an additional circumstance?

A: We have designed a section for you to select from a list of pre-generated circumstances. If your circumstance is not listed, please feel free to write us a letter explaining your circumstance. Please write "SPECIAL CIRCUMSTANCES," on the top of your letter, along with your name and application ID.

Q: I do not have the required tax documents. HELP!

A: Include the most recent tax documentation you have available. If you are asked for a specific line from a tax document that you have not yet completed, please estimate the projected amount.

Q: How will I know if I qualify for aid or not?

A: We do not disclose information about the results of your application. All final tuition aid decisions, including notification of an award amount (if any); will be made by your school. For the date award notices will be given, please contact your school directly.

SECTION 2

C. EMPLOYMENT INFORMATION (List all jobs held by Parent(s)/Guardian(s) since January 1st of the previous year even if no longer employed.

If Parent(s)/Guardian(s) have had more than 2 jobs this year, please find enclosed addendum form)

1. WHICH PARENT? (Parent/Guardian #1 or 2)	2. EMPLOYER NAME	3. CURRENTLY AT JOB? YES	4. PREVIOUS YEAR W-2 INCOME (Line 1 of the W-2 Form)	5. CURRENT YEAR EST'D INCOME (For current job)
①		<input type="radio"/>		
②		<input type="radio"/>		
①		<input type="radio"/>		
②		<input type="radio"/>		

D. BUSINESS INFORMATION (List all Business, Farm, Corporation, and Partnership income since January 1st of the previous year.

If Parent(s)/Guardian(s) have had more than two businesses this year, please find enclosed addendum form)

1. WHICH PARENT? (Parent/Guardian #1 or 2)	2. BUSINESS NAME	3. STILL OPERATING? YES	4. PERCENT OWNED
①		<input type="radio"/>	
②		<input type="radio"/>	
①		<input type="radio"/>	
②		<input type="radio"/>	

5. TYPE OF BUSINESS	6. PREVIOUS YEAR ACTUAL NET PROFIT	7. PREVIOUS YEAR ACTUAL DEPRECIATION	8. CURRENT YEAR ESTIMATED NET PROFIT
#1 <input type="checkbox"/> Proprietorship <input type="checkbox"/> Farm <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation	\$	\$	\$
#2 <input type="checkbox"/> Proprietorship <input type="checkbox"/> Farm <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation	\$	\$	\$

E. MONTHLY INCOME

1. WELFARE (TANF)	2. FOOD STAMPS	3. FOSTER CARE	MONTHLY SOCIAL SECURITY FOR 4. PARENT(S)/GUARDIAN(S)	5. DEPENDENTS (UNDER 19) OR ELDERLY
\$	\$	\$	\$	\$

6. CHILD SUPPORT	7. ALIMONY	8. MISCELLANEOUS MONTHLY INCOME	9. TYPES OF MISCELLANEOUS INCOME (Choose one or more items)
\$	\$	\$	<input type="checkbox"/> Housing Allowance <input type="checkbox"/> Veteran Benefits <input type="checkbox"/> Insurance <input type="checkbox"/> Annuity <input type="checkbox"/> Retirement

F. OTHER INCOME

INTERESTS AND DIVIDENDS		ANNUAL WORKERS' COMPENSATION	
1. PREVIOUS YEAR INTEREST	2. ESTIMATED CURRENT YEAR	3. ACTUAL PREVIOUS YEAR	4. ESTIMATED CURRENT YEAR
\$	\$	\$	\$
ANNUAL UNEMPLOYMENT		MISCELLANEOUS INCOME	
5. ACTUAL PREVIOUS YEAR	6. ESTIMATED CURRENT YEAR	7. ACTUAL PREVIOUS YEAR	8. ESTIMATED CURRENT YEAR
\$	\$	\$	\$

9. SELECT EACH TYPE OF MISC. ANNUAL INCOME RECEIVED IN PREV. YEAR

Royalties Inheritance Winnings Capital Gains Assistance from Relative/Friends 1099-M Income

SECTION 3

G. HOME EXPENSES (Please fill out RENT or HOME information, but not both)

RENT		UTILITIES ANNUAL ENERGY EXPENSES		
1. MONTHLY RENT	2. ANNUAL RENTERS INSURANCE	3. ELECTRICITY	4. GAS, OIL, COAL	5. WATER, SEWAGE
\$	\$	\$	\$	\$
HOME		8. IMPROVEMENTS, ADDITIONS		9. CURRENT MARKET VALUE
6. YEAR OF PURCHASE	7. PURCHASE PRICE	\$		\$
	\$	\$		\$
10. PRINCIPAL OWED ON PROPERTY (List total of all mortgages for this property)		11. MONTHLY MORTGAGE PAYMENT		12. PREVIOUS YEAR PROPERTY TAX (if not included in #11)
\$		\$		\$
\$		\$		\$
14. TYPE OF DWELLING <input type="checkbox"/> Single <input type="checkbox"/> Multi-Family		15. PREVIOUS YEAR RENTAL INCOME (if not a single family dwelling)		16. PREVIOUS YEAR RENTAL EXPENSES (if not a single family dwelling)
		\$		\$
		\$		\$

SECTION 3 CONT'D

H. MEDICAL EXPENSES (List only your payments for the below)

	1. PAYMENTS MADE IN PREVIOUS YEAR	2. CURRENT MEDICAL DEBT
MEDICAL/DENTAL	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>
PRESCRIPTION DRUGS	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>
VISION CARE	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>

3. HOW MUCH EMPLOYERS PAY FOR:

MEDICAL INSURANCE
 All Some None

DENTAL INSURANCE
 All Some None

I. ALIMONY AND CHILD SUPPORT PAYMENTS

1. NUMBER OF CHILDREN SUPPORTED	2. CHILD SUPPORT PAID IN PREVIOUS YEAR	3. ESTIMATED SUPPORT PAYMENTS FOR CURRENT YEAR	4. ALIMONY PAID IN PREVIOUS YEAR	5. ESTIMATED ALIMONY FOR CURRENT YEAR
<input type="text"/>	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>

J. CHILDCARE AND/OR ELDERLY CARE EXPENSES

	1. PREVIOUS YEAR PAYMENTS	2. ESTIMATED CURRENT YEAR
CHILD CARE	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>
ELDERLY CARE	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>

K. CHARITABLE GIVING (List your two largest contributions)

1. NAME OF CHARITY	2. PREV. YEAR CONTRIBUTIONS
<input type="text"/>	\$ <input type="text"/> , <input type="text"/>
<input type="text"/>	\$ <input type="text"/> , <input type="text"/>

SECTION 4

L. ASSETS & DEBTS - REAL ESTATE OTHER THAN HOME

1. NO. OF PROPERTIES	2. PURCHASE PRICE OF ALL PROPERTIES	3. IMPROVEMENTS/ADDITIONS	4. TOTAL CURRENT MARKET VALUE
<input type="text"/>	\$ <input type="text"/> , <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/> , <input type="text"/>
5. TOTAL PRINCIPAL AMOUNT OWED (List total of all mortgages for all properties)	6. TOTAL MONTHLY LOAN/MORTGAGE PAYMENT	7. PREVIOUS YEAR GROSS PROPERTY INCOME	8. PREVIOUS YEAR GROSS PROPERTY EXPENSE
\$ <input type="text"/> , <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/> , <input type="text"/>
9. TYPE OF PROPERTIES (Choose one or more items) <input type="checkbox"/> Recreational <input type="checkbox"/> Business <input type="checkbox"/> Investment <input type="checkbox"/> Rental <input type="checkbox"/> Other			

M. ASSETS - RETIREMENT PLANS

	1. PREVIOUS YEAR HOUSEHOLD CONTRIBUTION	2. PREVIOUS YEAR EMPLOYER CONTRIBUTION	3. PREVIOUS YEAR END VALUE
SELF MANAGED (IRA, SEP, ETC.)	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>
OTHER QUALIFIED PLAN (Pension, 401K, ESOP, 403 (b)(c))	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>

N. ASSETS & DEBT - AUTOMOBILES

(List information for the vehicles you own)		(List information for the vehicles you lease)	
1. NO. OF VEHICLES	2. TOTAL VALUE	5. NO. OF VEHICLES	6. TOTAL MONTHLY LEASE PAYMENT
<input type="text"/>	\$ <input type="text"/> , <input type="text"/>	<input type="text"/>	\$ <input type="text"/> , <input type="text"/>
3. TOTAL MONTHLY LOAN PAYMENT		7. ANNUAL TOTAL OF VEHICLE INSURANCE	
\$ <input type="text"/> , <input type="text"/>		\$ <input type="text"/> , <input type="text"/>	
4. TOTAL DEBT			
\$ <input type="text"/> , <input type="text"/>			

O. ASSETS & DEBTS - RECREATIONAL VEHICLES/BOATS

(Include all recreational vehicles: Motor homes, Boats, Motorcycles, ATV's, etc.)

1. TOTAL VALUE
\$ <input type="text"/> , <input type="text"/>
2. TOTAL MONTHLY LOAN PAYMENTS
\$ <input type="text"/> , <input type="text"/>
3. TOTAL DEBT
\$ <input type="text"/> , <input type="text"/>

P. ASSETS - CURRENT

1. CHECKING, SAVING, CASH, CD'S	2. STOCKS, SECURITIES, BONDS, MUTUAL FUNDS (Not included in Section M)
\$ <input type="text"/> , <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/> , <input type="text"/>

Q. MISCELLANEOUS DEBT

1. CREDIT CARD DEBT	2. EDUCATION - PARENT(S)/GUARDIAN(S)	3. EDUCATION - DEPENDENTS	4. PERSONAL BANK LOANS
\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>
5. LOAN COMPANIES	6. OTHER DEBT		
\$ <input type="text"/> , <input type="text"/>	\$ <input type="text"/> , <input type="text"/>		

