

The Children's Preschool 608 Whitney Avenue New Haven, Connecticut 06511

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Andrew Myers

Director director@thechildrenspreschool.org

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INSTRUCTIONS

Please download the 2-page pdf financial aid application, complete in Acrobat, save and e-mail to the director, Andrew Myers. Alternatively, print the pdf, complete and return by mail or fax to the address above.

Please attach most recent tax return and W-2's.

The Children's Preschool

Application for Financial Aid 2024–25

Background Information

Name of child			Date of birth
Parent 1 name		Home phone	Work phone
Address Street	City	State	ZIP
Parent 1 place of work/occupation			
Parent 2 name		Home phone	Work phone
Address Street	City	State	ZIP

Parent 2 place of work/occupation

Child Care Expenses

Please provide information on your child care arrangements to date.

1. Name of caregiver		Cost per month	
Address Street	City	State ZIP	
2. Name of caregiver		Cost per month	
Address Street	City	State ZIP	

Please estimate your family child care needs for the coming year. Number of children requiring care _____

Name of child/cost per month
Name of child/cost per month

4. Name of child/cost per month

2. Name of child/cost per month

Income and Expenses

Please provide income from all incoming sources before deductions such as taxes.

Parent 1 monthly gross income

Parent 2 monthly gross income

Other sources of income (please specify, e.g. family)

The Children's Preschool Application for Financial Aid 2024–25

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Income and Expenses continued

Please list current liquid assets, including savings, checking, money market, mutual funds, stocks, bonds and other assets that can be converted to cash.

Asset and \$ value	Asset and \$ value
Asset and \$ value	Asset and \$ value
Asset and \$ value	Asset and \$ value

Please list current monthly payments on debt, including mortgage, loans, credit cards, outstanding balances on child care and medical expenses, etc.

Debt and \$ payment per month	Debt and \$ payment per month
Debt and \$ payment per month	Debt and \$ payment per month
Debt and \$ payment per month	Debt and \$ payment per month

Request for Scholarship Assistance

We/I request \$ ______ in financial assistance. Please briefly describe the circumstances pertaining to this request.

The Children's Preschool has my permission to verify the information presented above by contacting employers and past caregivers.

Parent signature	Date
Parent signature	Date

Please attach most recent tax return and W-2's with this financial aid form.