

Woodhaven Preschool
at Willow Glen United Methodist Church

1420 Newport Avenue, San Jose, CA 95125
(408) 294-6072



Financial Aid Form

Financial Aid is based on need and availability of funds. A parent or guardian must complete this form in full in order to be considered for financial aid.

Financial aid will be granted on a first come, first served basis. Applications for full-year assistance must be submitted by April 1. Requests for emergency aid can be made throughout the year and will be offered for 2-3 months of partial assistance as funds allow. We will inform you if we are unable to fulfill your request for aid. All information provided on this form is strictly confidential.

Child's Information

Name _____ Home Phone _____

Address _____
Street City State ZIP

Birthdate _____ Male _____ Female _____ Session _____

Parent's or Guardian's Information

Child lives with: Both Parents _____ Mother _____ Father _____ Guardian _____

Parent's Name _____ Work Phone (____) _____

Cell (____) _____ E-mail: _____

Employer: _____ Occupation: _____

Annual Gross Income: _____

Parent's Name _____ Work Phone (____) _____

Cell (____) _____ E-mail: _____

Employer: _____ Occupation: _____

Annual Gross Income: _____

Aid requested: Full-year Scholarship _____ Emergency Assistance: _____

Amount I am able to pay/month: _____

Continued

Please state the reason for your request for tuition assistance:

Any additional information:

I understand that financial aid awards are made on a yearly basis and must be applied for each year. Every family pays something. Families shall notify the school if their financial condition improves so an adjustment can be made to their financial aid. Continued receipt of financial aid assumes the family and the student are in good standing.

Parent(s) or Guardian Signature _____ Date _____