



Parents' Financial Statement

*This 3 page statement is part of your child's application for Financial aid. It must be returned to the CabSummer, LLC, PO Box 4642, Wilmington, DE 19807 on or before April 15th, 2019. Please be advised we do not except applications via email. We request this information in order to make awards carefully. Our aim is to determine the financial need of all applicants and to distribute our available funds fairly. You are therefore urged to supply any additional information which seems significant to you. All information submitted will be treated confidentially.
Call: 302-766-3411 E-mail: info@cabsummer.org Website www.smartsummer.org*

Student's name: _____

Father or Guardian's name: _____

Daytime phone _____ Email _____

Home Address _____

City _____ State _____ Zip _____

Employer _____

Nature of business _____

Mother or Guardian's name: _____

Daytime phone _____ Email _____

Home Address _____

City _____ State _____ Zip _____

Employer _____

Nature of business _____

Parent's Annual Income (before taxes):

Actual 2018

Father \$ _____

Mother \$ _____

Total \$ _____

Do you own your home? ___Yes ___No

Do you have a mortgage? ___Yes ___No

Do you own other real estate? ___Yes ___No

If you rent your home, what are your monthly payments? \$ _____

Estimated 2019

Father \$ _____

Mother \$ _____

Total \$ _____

If yes, what is the estimated market value? \$ _____

What is your monthly payment? \$ _____

If yes, what is the estimated market value? \$ _____

Please list all siblings of the applicant and indicate the extent of financial support they are receiving during the 2010-2011 academic year.

Name _____ Age _____ School/ College/or Occupation _____

Name _____ Age _____ School/ College/or Occupation _____

Name _____ Age _____ School/ College/or Occupation _____

Name _____ Age _____ School/ College/or Occupation _____



Financial Aid Application

SMArtSummer is committed to building and maintaining a diverse community. We strive to attract students and families from different cultural and economic backgrounds. The purpose of our financial aid program is to remove financial barriers, not to create financial inducements.

Student's name: _____

Grade Next Year: _____ Current School _____

School Attending Upcoming School Year _____

Please list below the camp(s) with dates your student would like to attend. Please limit your choices to two camps. In most cases we can only award one week.... but we will do our best to provide a second.

Parent/Guardian's name: _____

Parent/Guardian's name: _____

1 Have you completed the Parents' Financial Statement (PFS) and submitted it to SMArtSummer?

Yes No

2 Have you sent your most recent 1040 Federal Tax Form (including all schedules) and a copy of your W-2 forms to SMArtSummer? Yes No

If you responded No to either question above, please explain: _____

Please indicate the total dollar amount available for the education of your child(ren), including additional sources of income such as assistance from other family members or friends, trusts, etc. \$ _____

What dollar amount do you feel you can contribute toward tuition for the desired class(es)? \$ _____

I have attached two teacher recommendations for and a report card showing grades earned by this student. Yes No

In applying for financial aid at SMArtSummer and in signing on the reverse side, we acknowledge that:

- It is our responsibility as parents to finance our children's education to the extent that we are able;
- We have explored all possible sources of funding prior to applying for financial aid;
- We have applied for financial aid for our other children that attend tuition-charging schools.

Furthermore, we understand that:

- All families are expected to contribute to some extent toward the cost of tuition;
- Financial aid is awarded based on demonstrated financial need;
- Financial Aid only covers tuition; it does not cover books, incidental expenses, or Before or After Camp;
- All information received by Cab Calloway Summer School of the Arts is held in the strictest of confidence. Financial aid is never shared with faculty members, donors, or among family members who maintain separate households;
- Families must reapply for financial aid each year to determine eligibility

Please use this space to explain any special family circumstances that SMArtSummer should know about:
for example, divorce, separation arrangements, dependencies, illnesses, special housing problems, etc.

Please submit this financial statement with your child's application along with a copy of your W-2 Tax forms by April 15th.

Signatures of Parents or Leagal Guardians:

Date _____