

Tuition Assistance Application

Parent/Guardian Information:

Name(s): _____

Phone: _____

Email Address: _____

Marital Status: _____

Annual Income: _____

Number of dependents: _____

Child(ren) Information:

Name(s): _____

Kidsborough Location: _____

Kidsborough Schedule:

Before School #of Days: _____

After School #of Days: _____

2025-26 Grade(s): _____

Required Documents Submitted:

- Proof of Voucher application
- 2024 IRS Form(s) 1040 (signed)*
- Current work (or school) schedule*
- 4 Weeks most recent paystubs*
- Custody statement
- Other

*or equivalent

By signing this form, I agree to Kidsborough's Tuition Assistance Policies and to the terms of payment provided in any offer of tuition assistance from Kidsborough. I certify that the information provided is complete and accurate, and represents all financial sources available for care of the above child(ren).

Parent/Guardian Signature

Date
