

Hanover Nursery School, Inc.

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Student Applicant Name: Sex:
Program Requested: Age / DOB:
Parent / Guardian 1: Cell Phone:
Employer / Occupation: Email:
Parent / Guardian 2: Cell Phone:
Employer / Occupation: Email:

FAMILY INCOME

Basic Tax Info

Have you completed your 2017 Tax Return? Yes No (use estimated)

If you filed or will file IRS Schedule A, what did you or will you report as your total itemized deductions?

What did you or will you pay in total federal taxes in 2017? *Refer to IRS Form 1040 (line 63), Form 1040A (line 39) or Form 1040 EZ (line 10)*

Total Taxable Income

Salaries and Wages:

Total salaries and wages can be found in Box 1 of W2 form given to you by your employer. If you have more than one W2, add the amount from each W2.

	2017 (actual)	2018 (estimated):
Salaries and wages for Parent / Guardian 1:	\$	\$
Salaries and wages for Parent / Guardian 2:	\$	\$

Dividends & Interest Income:

Refer to your 1099-INT statement (or line 8a from your 1040) for interest income and/or your 1099-DIV statement (or line 9a from your 1040) for dividend income.

	2017 (actual)	2018 (estimated):
Salaries and wages for Parent / Guardian 1:	\$	\$
Salaries and wages for Parent / Guardian 2:	\$	\$

Alimony:

	2017 (actual)	2018 (estimated):
Alimony received (Do not include child support)	\$	\$

Other Taxable Income:

Includes income you received from rental properties, estates or trusts, household expenses paid in lieu of alimony, capital gains, and unemployment compensation benefits. These amounts are all listed in the Income section of your Form 1040 or 1040A.

	2017 (actual)	2018 (estimated):
Total other taxable income	\$	\$

Student Income

Student Income and Assets:

Does applicant have any income or own any assets including inheritances and/or trust funds? If yes, provide details including income and value of assets.

	2017 Income (actual)	2018 Income (estimated):
Student Income	\$	\$
	Total Value	Itemize Assets
Student Assets		

Other Nontaxable Income:

Includes cash support, gifts, or money paid to you (or to others on your behalf) by relatives or non-relatives; welfare benefits, veteran's benefits, worker's compensation or other untaxed income/benefits not specified.

	2017 (actual)	2018 (estimated):
Total other nontaxable income	\$	\$

FAMILY ASSETS AND DEBTS

Real Estate

	2017 Income (actual)	2018 Income (estimated):
If you PAY RENT on the home you currently live in, provide the TOTAL amount you paid/will pay in rent for the entire year.	\$	\$

If you OWN the home you currently live in, provide the following information:

Year Purchased	Purchase Price	Present market Value	Unpaid Principal on Mortgage	Annual Payments on Mortgage
	\$	\$	\$	\$

If you own property other than your primary home, provide the following information for each property:

Address	Purpose / Use of Property:		
	additional family home	rental income	vacant land

_____			other
Purchase Price	Present Market Value	Unpaid Principal on Mortgage	Annual Total Payments on Mortgage
	\$	\$	\$

Please use available space as needed.

FAMILY EXPENSES

This helps HNS assess your full obligation to pay tuition and other educational expenses. Please be realistic about the amount you can contribute, keeping in mind that the primary responsibility for paying for your child's education lies with you.

Educational Expenses

How many children (*applicants and other dependents*) are / will be receiving support from you in 2018?

How many will attend tuition-charging institutions (childcare centers, schools or colleges)?

List all of the tuition contributions you received in 2017-18:

How much financial aid did you receive? \$

How much money did you contribute from your own earnings or assets? \$

How much did you contribute from the applicant's earnings or assets? \$

How much did you borrow in loans? \$

How much did you receive from relatives, friends, trust funds or other sources? \$

What is the estimated full cost of tuition for this applicant for the academic year? \$

Financial Assistance Request

What amount of financial assistance is the applicant seeking?

\$500 - \$999

\$1,000 - \$1,499

\$1,500 - \$1,999

\$2,000 - \$2,500

Additional Information

Please use this area to explain any circumstances not reflected on this form that supports your need for financial assistance.

BUSINESS

Business Information

Provide this information for each business owned

Owner(s) / Partner(s) in business

Business name

Year business operation began

Business Type: Sole Proprietorship Partnership Corporation

Street address

City

State

Zip Code

Describe service or product provided

Business Income

	2017 (actual)	2018 (estimated):
Gross receipts and sales	\$	\$
Cost of goods sold and / or operations	\$	\$
Other business income	\$	\$

Business Expenses

	2017 (actual)	2018 (estimated):
Salaries / wages paid to you or your spouse	\$	\$
Other wages and additional compensation	\$	\$
Business property rent and / or mortgage payments	\$	\$
Depreciation	\$	\$
Other expenses (will need to explain)	\$	\$
Amount paid for self-employment tax	\$	\$

Business Assets

	2017 (actual)	2018 (estimated):
Total current assets	\$	\$
Accounts receivable minus reserve for bad debt	\$	\$
Cash reserve for depreciation	\$	\$
Total noncurrent assets	\$	\$
Other business assets	\$	\$

Business Debts

	2017 (actual)	2018 (estimated):
Total mortgages on land and buildings	\$	\$
Debts on equipment and machinery	\$	\$
Other business debts	\$	\$

FORMS

Please provide the following forms along with this application.

- Prior year's tax return (for 2018-2019 students, provide the 2016 Federal Tax Return)
- Current year's tax return when completed (for 2017-2018 students, provide the 2017 Federal Tax Return)
- Next year's tax return as it becomes available (for 2017-2018 students, provide the 2018 Federal Tax Return)

INDIVIDUALIZED PAYMENT PLAN

For applicants requesting financial aid, HNS recommends a payment plan. Please choose from the following:

- Quarterly (four payments: June 1st, September 1st, December 1st, and March 1st)
- Bi-annually (two payments: June 1st and December 1st)